ANNUAL REPORT

OF THE

GRANT MEDICAL COLLEGE

BOMBAY

FOURTH YEAR.—SESSION 1853-54

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ANNUAL REPORT

OF THE

GRANT MEDICAL COLLEGE

BOMBAY.

FOURTH YEAR. SESSION 1849-50.

PROFESSORS.

C. MOREHEAD, M. D.,
Professor of the Institutes and Practice of Medicine.

JOHN PEET, Esq., Professor of Anatomy and Surgery.

H. GIRAUD, M. D., Professor of Chemistry and Materia Medica.

R. D. PEELE, Esq., Officiating Professor of Midwifery.

W. C. COLES, M. D. Officiating Professor of Medical Jurisprudence.

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1. This Session has been in several respects a very important one. Instruction has been communicated in two additional branches of Medical Education — Midwifery and Medical Jurisprudence; and measures have been adopted with the view of extending the advantages of the courses of instruction to the subordinate Medical Establishment. These several subjects will be considered in their appropriate places in this Report.

2. The Annual Examination for the admission of Students was held on the 12th April 1849, when 9 Candidates presented themselves. Of these, 3 were admitted as Free and 2 as Stipendiary Students.

3. Twenty-seven Students have attended the College during the past Session. Their names, castes, ages, and the dates of their registration will be found recorded in Appendix (A.)

4. The course of instruction in the College has been conducted strictly in accordance with the prospectus submitted to the Board of Education before the opening of the Session, and which forms Appendix (B.) of the Report.

5. The attendance of the Students has been regular. A reference to the abstract of the Roll-Calls, Appendix (C.) will shew that absence has been, with a few exceptions, occasioned by sickness or in consequence of leave granted, on just grounds being shewn.

Anatomy.

6. Fourteen Students and 12 Student Apprentices have attended the Anatomical Class. The Lectures have, as during the preceding Session, amounted to 108, and have been delivered in accordance with the Syllabus which forms Appendix (B.) of the Report for the year 1847-48. Care has, however, been taken to make those additions and corrections which recent investigations in General Anatomy have in some instances rendered necessary.

7. Mr. Peet reports that he has every reason to be perfectly satisfied with the attention paid by the Students, and with the progress made by them, as tested by the weekly examinations and those held at the close of the Session.

8. Practical Anatomy has also occupied the atten-

tion of the Students and on this subject the Professor observes, "Dissections commenced in the early part of November and were continued without interruption until the first week in March. The zeal with which this branch of their studies has been pursued by the Students generally is most praiseworthy and the practical acquaintance with the subject acquired by many of them was satisfactorily shewn at the Annual Examination. The senior Students confined their attention chiefly to the study of the various surgical regions connecting the Anatomy of these parts with the diseases and injuries to which they are liable and with the performance of surgical operations most frequently required. The facilities for the study of Practical Anatomy have been ample. The preparations for the illustration of my Lectures have been diligently and carefully prepared by Sadashew Hemraj and Shamrao Narayan, who have both shewn themselves zealous Practical Anatomists."

Chemistry.

9. Ten Students and 12 Student Apprentices attended the Chemical class. The course consisted of 72 Lectures, delivered in accordance with the Syllabus which forms Appendix (C.) of the Report of the College for the year 1847-48, except in so far as the advancing state of Chemical Science made it necessary to depart from that arrangement.

10. The course of Practical Chemistry was conducted in the same manner as in the two preceding Sessions.

11. Dr. Giraud reports favorably of the progress made by Palonjee Pestonjee, Rustomjee Byramjee, Bala Gopal and Ruttonjee Hormusjee, and commends Rustomjee Byramjee for the creditable manner in which he had performed the duties of Chemical Assistant.

Institutes of Medicine.

12. Nine Students attended this course which consisted of 72 Lectures, delivered in accordance with the Syllabus, Appendix (E.) of the Report for 1847-48.

13. The Physiological division of the course, is that part which chiefly forms the subject of the weekly examinations and monthly written exercises. Rustomjee Byramjee, Narayan Dajee, Sadashew Hemraj and Balcrushna Chintoba, have during the Session made very creditable progress.

Materia Medica.

14. Nine Students and 12 Student Apprentices attended the course of Lectures,on Materia Medica which amounted to 72,—and which were delivered in accordance with the detailed Syllabus which forms Appendix (C.) of the last Report.

15. The Junior Students have also been in rotation practically engaged in compounding and dispensing Medicines in the Hospital and have exhibited praiseworthy zeal and industry.

Practice of Medicine.

16. Seventeen Students have attended this course which consisted of 72 Lectures delivered in accordance with the Syllabus which forms Appendix (D.) of this Report. The proficiency exhibited by the 4th year Students at the Annual Examination was in every respect satisfactory. Sebastian Carvalho, Anunta Chundroba, Atmaram Pandurung, J. C. Lisboa, Paul Francis Gomes, Merwanjee Sorabjee and Muncherjee Sorabjee acquitted themselves with much credit.

Clinical Medicine.

17. The same Students who attended the course of the Practice of Medicine have daily followed that of Clinical Medicine.

18. In the last Report of the College the arrangements of the Clinical Ward and the manner in which the patients were selected from the general wards of the Hospital were fully explained. A similar system, in these respects, has been observed during this Session.

19. The greater proficiency of the students has admitted of considerable modification of the manner in which the duties of the ward have been conducted. Instead of the daily reports, being dictated by the Professor, they have been previously prepared by the Clinical Clerk and have been read by him at the bedside of the patient. The statements made in them have been then scrutinized by one or two of the attendant Students, at the request of the Professor, with the view of testing the accuracy of the reports and of correcting defects which may be apparent in the Students' manner of examining the sick.

The Clerk has then been required to suggest the treatment, to propose a prescription, and the other students have been encouraged to state objections and propose amendments should any occur to them.

20. The advantages resulting from these modifications have been, that the time has not been taken up in dictation and writing, but wholly occupied in observing and reasoning on the phenomena of disease. By means of conversation, explanation, interrogation, the attention of the Students has been kept more fixed and interested and their powers of observation and reflection more certainly exercised. These objects, most important to keep in view in the education of all youth, are more especially necessary in regard to those who have not had the advantage of that early mental discipline and training which is the privilege of the young of the educated classes of other countries. While the Students have been encouraged to express themselves freely in regard

to what they observe in the ward, it has been impressed upon them that they are only expected to do so after they have carefully observed and reflected. No countenance has been given to frivolous questions and remarks.

21. The thirteen Students who are in the 4th year of their Studies, and one of the 3rd year Students, Narayan Dajee have in rotation officiated as Clinical Clerks; and the following nine may be mentioned as those of them who have conducted the duties with the greatest efficiency, assiduity and attention to the wants of the sick. Mr. Carvalho, Atmaram Pandurang, Bhao Dajee, Merwanjee Sorabjee, Mr. Gomes, Mr. Lisboa, Muncherjee Sorabjee, Anunta Chundroba and Narayan Dajee.

22. Many of the Students have also assisted in conducting the duties of the Dispensary, for outpatients. The Seniors in prescribing for some of the sick, under the superintendence of Dr. Peet and Dr. Giraud. The Juniors in registering the names of the patients and in dispensing medicines.

23. In addition to the daily Clinical instruction in the Hospital, 33 Lectures have been delivered, in the College, on the cases treated in the ward. Sometimes indeed the consideration of the cases has assumed more the character of interrogation of the Students than of a formal lecture; and probably in future Sessions it will be found expedient to give still more of the time of these weekly meetings in the College to examination in the Practice of Medicine and to restrict Clinical instruction to its only true arena, the bed-side of the sick. It has already been explained in a former report that as few of the patients understand English, those difficulties which stand in the way of conducting Clinical instruction in Medical Schools, when the Teacher and the sick speak the same language, are not

experienced here, and that it is incumbent on us to turn these advantages to the fullest account.

24. In Appendix (E) will be found a tabular statement of the diseases which have been under treatment in the Clinical Ward, from which some judgment may be formed of the opportunities which the Students have enjoyed of becoming practically acquainted with disease.—This statement however by no means exhibits the full extent of these opportunities.—Asiatic Cholera and Small-pox have prevailed extensively during the Session and the assiduous Students have not failed to direct their attention to the practical study of these formidable diseases.

25. With the view of shewing the capabilities of the J. J. Hospital and Dispensary as a practical School of Medicine and Surgery, during the past Session, it has been deemed expedient to annex a return of the patients admitted and the results. It forms Appendix (F. and G.) of this report. It will be observed that the mortality shewn in the Hospital Return is very great. This depends on the state of destitution of many of the inmates and the advanced stages of disease at which many of the admissions take place, as has been frequently explained in the Official Reports of the Institution.

Surgery.

26. Seventeen Students have attended the course of Surgery which consisted of 64 Lectures on Surgery and 33 Clinical Lectures and examinations.

27. Mr. Peet observes that the only change of importance between the arrangement of the lectures in this and the preceding Session was the introduction of Operative Surgery, as part of the regular course. Whereas, in the preceding Session, surgical operations

were performed in the dissecting room upon days distinct from those of Lecture. In order to admit of sufficient time being available for this arrangement the lectures were generally condensed, and a few in the first division curtailed. In future courses, the number of Lectures will be increased to 70, and still further time will be given to Surgical Anatomy and Operative Surgery. A detailed Syllabus will form an Appendix to the next report of the College.

Clinical Surgery.

28. Has been taught during this Session in the same manner as was explained in the report of the preceding one.

Minor Surgery.

29. The Professor reports that the opportunities of acquiring facility and neatness in the performance of the minor surgical operations and in the application of splints and bandages have been considerable as will appear from a reference to the list which forms Appendix (H.) He is moreover favorably impressed with the capability possessed by the Students, generally, of attaining a considerable amount of dexterity in these manipulations and is not without hope that the arrangements of the ensuing Session will admit of a still more close and systematic attention being paid to this branch of Surgery.

30. A table of the injuries and diseases treated in the Clinical Surgical Ward, will be found in Appendix (J.) and Mr. Peet remarks that the number has been quite sufficient for the illustration of the greater number of his Surgical Lectures and that, with perhaps one or two exceptions, the Students have shewn every disposition to avail themselves fully of the information they were calculated to afford.

31. The List of Capital operations performed in the

presence of the Students form part of the same Appendix (J.)

MIDWIFERY AND MEDICAL JURISPRUDENCE.

32. At the opening of the Grant Medical College, no arrangement was made for instruction in Midwifery and Medical Jurisprudence. Nor was it necessary that there should be. These important branches of Medical education were not to constitute part of the curriculum before the commencement of the 4th year of study. But the Board of Education, wisely anticipating the necessity that would then arise, brought the subject before the notice of the controlling authorities in such time as would admit, it was hoped, of the necessary arrangements being made.

33. In this, however, expectation was disappointed. The commencement of the session drew near. The only alternative seemed to be the post-ponement for another year of instruction in Midwifery and Medical Jurisprudence and consequently a check to the onward progress of the Students, which could not have been incurred without shaking the confidence of the public in the efficiency and stability of the Institution.

34. From this threatened embarrassment the College was relieved by the generous professional zeal of Dr. Peele, and of Dr. Coles. The former gentleman volunteered to officiate as Professor of Obstetric Medicine, the latter as Professor of Medical Jurisprudence.

35. These liberal offers were accepted by the Government; and the 4th year students have enjoyed the promised advantage of systematic instruction in these two important branches of medical study.

36. They, who have enjoyed the opportunity of listening to the well arranged and practical lectures of these gentlemen and of being present at the examina-

tion of their students, can amply testify to the ability and success with which their courses of instruction have been conducted and to the advantages which their unrequited labors have conferred upon the students of the College.

37. It is indeed most desirable that Obstetric Medicine and Medical Jurisprudence should be taught to the medical student of this country by able, judicious and practical men, because, during the course of their professional career, sound knowledge and practical experience in both these branches will be called into frequent requisition.

38. The dangers and difficulties which through officious ignorance so frequently complicate child-birth among the females of India, the mortality or derangement of health, the consequences of subsequent mismanagement, are facts familiar to and much deplored by medical men in this country.

39. There can be no doubt that the intelligent and reflecting portion of the community, generally, are fully aware of these serious evils and are ready actively to assist in their early removal.

40. This indeed is evident from the proceedings of a meeting which has lately been held in this place and which will be found recorded in Appendix (K.) of this Report.

41. That a good knowledge of Medical Jurisprudence is also essential to the efficiency of the native medical practitioner is not to be questioned. The instances, in which medical evidence is or ought to be required in the courts of India, are very numerous indeed and they often involve questions of the greatest importance in the just administration of the laws.

42. In proof of the frequency of these occurrences it may be mentioned that, taking the average of the last

2 years, about 500 persons are received annually into the Jamsetjee Jeejeebhoy Hospital in regard to whom information involving professional knowledge is required by the Magistrate or Coroner, either in the form of a written certificate or oral testimony on oath.—Further that taking the average of the last 2 years, 172 inquests are held annually in Bombay before the Coroner; that, in 48 of these, medical evidence has been given and that in many others it would have been very desirable. If such be the demand for medical testimony in judicial enquiries in Bombay, the same necessity may be safely assumed to exist and its want to be often felt in the administration of justice in the mofussil courts.

43. But the importance of medical testimony in judicial enquiries is also well known to the intelligent members of the native community. The writer of this report remembers well, when conversing with Juggonath Sunkersett, Esq. on the advantages likely to accrue from the establishment of the Medical College, that enlightened advocate for the education of his countrymen remarked that the existence of a class of educated native medical practitioners would go far to remove those obstructions which the prejudices of caste or of ignorance have not unfrequently opposed to the investigations of the Coroner in instances of death under suspicious circumstances.

44. Nor is this experienced member of the Education Board singular amongst his countrymen in entertaining this belief of the importance of Medical Jurisprudence to the native practitioner of medicine and to the general community. During the course of the Session a letter has been placed in the hands of the Superintendent of the College by Ali Mahomed Khan, a gentleman well known for the active interest which on different occa-

sions he has shewn in the proceedings of the Native Education Society and again, more recently, for the liberal aid which he afforded towards the alleviation of the sufferings of the poor in the late season of extreme sickness.

The letter is as follows :—

To the Superintendent of the Grant Medical College.

Sir,—It is with much gratification that I in common with my countrymen generally have observed the advancing knowledge of the Students of the Grant Medical College, and I am desirous of aiding in their encouragement.

I have learnt that the senior students have been, during the present Session and will be again in the ensuing one, engaged in the study of Medical Jurisdence; and when I reflect on the many cases which come before our Courts of Justice in this country,—in which medical evidence is required—cases of suspected poisoning, cases of serious personal injury, or death from violence—I cannot but think that it is very expedient that the attention of the Students should be particularly directed to the study of this subject ; and with the view of encouraging them, I beg now to intimate my wish to present to the student most proficient in Medical Jurisprudence at the close of next Session a box containing a selected assortment of chemical apparatus and re-agents for the detection of poisons; also a copy of Christison's Treatise on Poisons.

I have the honor to be,

Sir,

Your most obedient Servant,

(Signed.) Ali Mahomed.

4th March 1850.

Midwifery.

45. Thirteen Students attended this course which consisted of 47 lectures, and 36 examinations. Dr. Peele reports that the progress made by the Students afforded him much satisfaction. The appearance made by them at the annual examination was in every respect creditable to their industry.

A memorandum of the course forms Appendix (L,) of the Report.

Medical Jurisprudence.

46. Thirteen Students attended this course. The number of lectures was 50, examinations 25. Dr Coles reports that throughout the course the Students were attentive and industrious, and that the result of the periodical and annual examinations shewed that, with a few exceptions, they had acquired a very considerable and creditable acquaintance with the subject matter of the lectures.

In appendix (M.) will be found an outline memorandum of the course.

47. Such then is a report of the studies in which the regular Students of the College have been engaged during the session.

They include Anatomy, Chemistry, the Institutes of Medicine, *Materia Medica*, the Practice of Medicine and Clinical Medicine, the Principles of Surgery and Clinical Surgery, Midwifery and Medical Jurisprudence.

Every Student in each subject is required to provide himself with the work which has been fixed on as the text-book. In order that a complete view of the system of education may be exhibited, a list of the text-books in the several subjects has been drawn up and is recorded in Appendix (N.)

STUDENT APPRENTICES.

48. Let us now pass to another circumstance of the session which constitutes a new feature in the proceedings of the College, one by which its courses of instruction will be rendered more extensively useful and more immediately applicable to the purposes of the public Service. This College, as that of Bengal, was instituted with the object of qualifying the regular Students to undertake the responsibilities of independent medical practice. About the 5th year of the operations of the Bengal Medical College, various measures were adopted with the view of extending some of its advantages to the subordinate Medical Establishment so that through its influence, they might become better qualified for the duties required of them in the public service. Of the pupils now in attendance at the Bengal College more than one half is of this class, not being educated for independent medical practice, but, through a short curriculum of study, being made better fitted for the efficient discharge of the subordinate duties which they are required to perform in the regimental and other hospitals of the public service.

49. Desirous that similar benefits should be conferred on the medical apprentices and that similar advantages should accrue to the Government establishments of this Presidency, Dr. Burnes on the 26th of April last recommended that 15 of the most intelligent Medical Apprentices should be attached to the Jamsetjee Jeejeebhoy Hospital and should under the title of "Student Apprentices" receive during the session, in the Grant Medical College, instruction in Anatomy, Chemistry, and Materia Medica. This suggestion was approved of by the Government. But of the 15 selected Student Apprentices only 13, in consequence of the lateness of the season, were able to

join the College before the commencement of the Session. These Student Apprentices have attended the College with regularity and the progress made by them in Anatomy, Chemistry and Materia Medica has been, with one or two exceptions, creditable and satisfactory.

50. The success which has attended this experiment has been so encouraging, that it is to be hoped no difficulty will be experienced in gradually so remodelling the subordinate medical establishment as to give to the Apprentices, at a sufficiently advanced period of their service, the advantage of instruction in the College, for two years, in Anatomy, Chemistry, Materia Medica and the Elements of Surgery and Medicine.

Examinations for Honors.

51. In the month of September 1849 the notification which forms Appendix (O.) of the Report was published in the Government Gazette. It intimates the conditions on which the Carnac, Farish, Anderson, and Reid Scholarships, the Sir Jamsetjee Jeejeebhoy and Venayuk Gungadhur Shastri Prizes were to to be awarded at the end of the Session.

52. The prospectus which forms Appendix, (P.) will explain the character of the examinations held for the award of these Scholarships and other honors.

53. In this it will be observed that one day was allotted for clinical examination in Medicine and Surgery, at the bedside of the sick in the wards of the Hospital. This course was followed with the view ef testing the real practical acquaintance with medicine and surgery possessed by the Students.

54. Such a mode of examination should, it may be with safety affirmed, be adopted in all instances when the object is to ascertain the extent to which a capacity

has been really acquired of practically applying the sciences of medicine and surgery.

55. The written questions proposed in Anatomy, Chemistry, Physiology, Materia Medica, Botany, Surgery, Practice of Medicine, Midwifery and Medical Jurisprudence, have been arranged and constitute Appendix (Q.) of the Report.

56. The Scholarships and Prizes notified for competition were awarded to the following Students :—

57. The *Anderson* Scholarship of Rs. 25 monthly to the best Anatomist, practical and surgical Anatomy included, open to all the Students of the College, was competed for by five Students Sebastian Carvalho, Atmaram Pandurung, J. C. Lisboa, Muncherjee Sorabjee and Narayan Dajee.—The performances of all were very creditable but ATMARAM PANDURUNG was the best, and to him the Scholarship was awarded.

Three Scholarships were open for competition to the 4th year Students.

1. The *Carnac* Scholarship of Rs. 25 for the greatest proficiency and Practical knowledge of Medicine and Surgery to SEBASTIAN CARVALHO.

2. The *Farish* Scholorship of Rs. 20 monthly for the 2nd degree of proficiency in and practical knowledge of Medicine and Surgery to Atmaram Pandurung; but to this Student a Scholarship has been already awarded, therefore, according to the terms of the notification the Scholarship passed to the proficient in the next degree, J. C. LISBOA and a prize of books was conferred upon Atmaram Pandurung in token of his successful competion.

3. The *Anderson* Scholarship of Rs. 15 monthly for the 3rd degree of proficiency and Practical knowledge of Medicine and Surgery to ANUNTA CHUNDROBA he being the next in degree, after J. C. Lisboa

In the notification it is stated that in awarding these Scholarships for proficiency in Medicine and Surgery much importance would be attached to assiduous and regular attendance in the Clinical wards and to efficiency and zeal in discharge of the duties of Clinical Clerk and Surgical Dresser. It is in consequence of defect in these respects that Anunta Chundroba was not classed second in Medicine and Surgery—a position in which his written and viva voce examinations would otherwise have certainly placed him.

One Scholarship was open for competition to the third year Students.

The *Reid* Scholarship of Rs. 20 monthly for the greatest proficiency in the principles and practice of Medicine and Surgery was awarded to NARAYAN DAJEE.

Two Scholarships were open to the third and second year Students, 1st an *Anderson* Scholarship of Rs. 20 monthly for the greatest proficiency in Anatomy and Physiology was awarded to Narayan Dajee; but to this very industrious Student a Scholarship had been already allotted, therefore this passed to the proficient in the next degree, RUSTOMJEE BYRAMJEE, and Narayan Dajee recived a prize of books.

The *Farish* Scholarship of Rs. 20 monthly for the greatest proficiency in Materia Medica and Practical Pharmacy was also gained by Narayan Dajee but in the terms of the notification he received a prize of books. And as no other Student of Materia Medica came up to the required standard, the Farish Scholarship was not re-awarded.

To the Students of the 2nd and 1st year two Scholarships were open.

1st. The *Carnac* Scholarship of Rs. 15 monthly for the greatest proficiency in Anatomy has been awarded to

Rustomjee Byramjee, but to him a higher Scholarship for proficiency in the same subject has been already allotted, therefore this passed to the proficient in the next degree BALKRISHNA SACHARAM.

2nd. The *Carnac* Scholarship of Rupees 15 monthly for the greatest proficiency in Chemistry both theoretical and practical to PALONJEE PESTONJEE.

To the 1st year Students one Scholarship was exclusively open.

The *Farish* Scholarship of Rs. 10 monthly for the greatest proficiency, care and accuracy in compounding and dispensing medicines in Hospital has been awarded to BALLA GOPAL.

58. The *Sir Jamsetjee Jejeebhoy Medical Prize* of Rs. 250 open to the Clinical Clerks and Surgical Dressers, among the 4th year Students, for the best Clinical Report of medical and surgical cases was competed for by Bhawoo Dajee, Sebastian Carvalho, J. C. Lisboa, and Atmaram Pandurung. The exercises of all the competitors were very creditable.—That of MR. CARVALHO, was the best and to him the prize was awarded.

59. The *Venayuk Gungadhur Shastree* Prize, for the greatest acquaintance with Indian Plants in addition to a good knowledge of Materia Medica, was open to all the Students of the College. It was competed for by Sebastian Carvalho, and Narayan Dajee, the former a 4th year Student the latter a 3rd year Student. The exercises of both were very accurate and complete but that of MR. CARVALHO, was the best and to him the prize was awarded.

60. Besides the successful competitors for scholarships and prizes there are several other Students whose industry and proficiency were conspicuous. Of these

Paul Francis Gomez, Merwanjee Sorabjee, Muncherjee Sorabjee, and Ruttonjee Hormusjee, are the most derserving of commendation. Bhawoo Dajee, a distinguished Student of former years was, on account of sickness, unable to compete.

61. The promotion of the following Stipendiary Students has been recommended and sanctioned.

From the 2d to the 3rd class, Narayan Dajee, Sudashiva Hemraj, Shamrao Narayan, Balkrishna Chintoba. From 1st to the 2d class. Balla Gopal, Ruttonjee Hormusjee.

62. Appendix (R) is an abstract of the results of the examinations, it exhibits the Students classed in the order and degree of their proficiency in the several branches of their studies during the session.

Examination of Student Apprentices.

63. The Student Apprentices have also been carefully examined in Anatomy, Chemistry, and Materia Medica. The most proficient is Edward Carpenter and to him the Medical Board awarded a prize in token of the satisfaction which they had derived from the report received of his good conduct, industrious, habits and very respectable acquirements. Of the other Student Apprentices there are also several whose conduct, industry and acquirements are worthy of praise; of these I would name Shreeput Sheshadri, William Conway, Nagapah and William Douglas.

64. Appendix (S) is an abstract of the examination of the Student Apprentices. It exhibits them classed in the order and degree of proficiency in the several branches of their studies.

65. It formed part of the instructions relative to the Student Apprentices, that at the close of the Session a report should be made to the Medical Board of the suc-

cess or otherwise which has attended this experiment, and that suggestions having in view a permanent arrangement should be offered. This report will be found in Appendix (T).

ANATOMICAL MUSEUM.

66. When it is recollected that the Museum is without a Curator and that the time of all the Professors and of the Students is otherwise most fully engaged, I think that the progress which is being gradually made is very satisfactory and more than could reasonably be looked for. During the past session 74 preparations have been added to the museum. Of these 60 are the work of the students and the skill and delicacy evinced in the execution of several of them, would entitle them to no mean place in the extensive museums of old established schools.

67. A detailed list of these preparations with the names of the donors will be found in Appendix (V).

68. Bhawoo Dajee, Narayan Dajee, Palonjee Pestonjee, Atmaram Pandurang, Merwanjee Sorabjee, and Sadashiva Hemraj are the Students to whom the museum has been chiefly indebted during the session.

The contributions by Bhawoo Dajee of 15 skulls of natives of India, 1 Chinaman, 1 native of Java, 1 native of Manilla and 2 natives of Africa are particularly valuable, and form the nucleus of what no doubt before long will constitute an authentic series of the characteristic skulls of the different varieties of the human race.

69. To Narayan Dajee has been entrusted the general care and arrangement of the museum and he has discharged these duties with his accustomed industry and trustworthiness.

Library.

70. The additions to the Library during the session have been chiefly by donations; of these the principal consisted of about 40 volumes, many of them very valuable, the property of the late Assistant Surgeon Carr, presented to the College by the Lord Bishop of Bombay.

71. The volumes of this valuable gift have each been suitably inscribed, and arranged in a distinct series in token of gratitude, and sympathy in the affecting circumstance which their presentation has served to commemorate.

Collection of the Articles of the Materia Medica and Minerals.

72. Specimens of a large number of drugs Officinal in the British Pharmacopeias and necessary to complete the College collection were indented for in 1847, but they have not yet been received. At that time also an assortment of chemical apparatus necessary to complete the furniture of the Laboratory was indented for but of this also no tidings have been received.

73. During the past session the Bombay Branch of the Royal Asiatic Society has presented the College with a valuable donation of 75 selected and beautiful specimens of metallic ores which, with the minerals previously in the collection, have been systematically named and arranged in accordance with the classification of Phillip's Mineralogy.

74. Besides a good assortment of earthy minerals, the collection contains the ores of the following metals: Iron, Manganese, Chromium, Cobalt, Nickel, Zinc, Tin, Molybdynum, Cerium, Yttrium, Uranium, Tantalum, Arsenic, Antimony, Tellurium, Bismuth, Copper, Lead, Silver, Mercury and Gold; and these have

been found to be of great service in illustrating the Chemical Lectures.

Donations to the College.

75. It has been a pleasing duty at the close of each recurring session to report some fresh instance of liberality on the part of the Native Gentlemen of this community, from which it is reasonable to infer that they are fully sensible of the good which is likely to result from the Institution and are desirous of promoting its interests to the utmost of their power.

76. The names of Sir Jamsetjee Jejeebhoy, Juggonath Sunkersett, Framjee Cawasjee, Venayak Gungadhur Shastri, and Ali Mahomed Khan, are already honorably associated with the College. To this list I have now to add the name of a foreign Prince His Highness the Guicowar, who during his late visit to Bombay evinced much interest and curiosity in the arrangements of the College and was pleased to present a donation of Rs. 4,000 to be appropriated in such manner as shall conduce most to promote the efficiency of the Medical School.

77. This most liberal gift has been appropriated, as has already been reported, to the purposes of the Obstetric Institution—a ward in which will be designated by his Highness' name.

Examination of Candidates

For Admission.

78. On the 12th April, and 12th June, the examination of Candidates for admission took place nine candidates for admission as Free Students presented themselves. Of these eight were found qualified.

79. One student Hurrichund Chundroba has ceased to attend during the session; his name will therefore

be removed from the list, and the 5th Session of the College will open on the 15th of June, with stipendiary Students 20, free Students 11; in all 34 regular Students; also 16 Student Apprentices, being an aggregate of 50 pupils in attendance in the College.

CARNAC FABISH, ANDERSON, AND REID, SCHOLARSHIP FUNDS.

SIR JAMSETJEE JEEJEEBHOY MEDICAL BOOK AND PRIZE FUNDS.

80. As the official year has just closed and as it is desirable not to delay the publication of the College report it will be a more expedient arrangement that the statement of the account of these funds be allowed to be one year in arrears.

81. The statements for the year 1848-49, appeared in the report for the same year; those of 1849-50 will be published with the College report for 1850-51.

CONCLUDING REMARKS.

82. At the close of this, the 4th Session of the College, it may prove useful and instructive to take a short retrospective view of those circumstances which distinctly bear upon the question of the success and prospects of medical education in this place. It further may prove useful and instructive to compare the progress and state of this College, yet in its infancy, with that of Bengal now in the prime of its full maturity and in the enjoyment of that full measure of support which, from its success and its usefulness, is so justly its due, and which liberal and enlightened governments are ever ready to extend to all honest and well directed efforts, which have in view to substitute knowledge for ignorance and to ameliorate the condition of a suffering people.

83. And first, I would allude to the number of the Students in this College. During the four years that it has been in existence, 92 candidates have presented themselves for admission, of these 52 have been found qualified.

84. The College opened with 12 Students. Admission takes place only once in the year. The numbers have from year to year steadily increased and there are now on the rolls 34 regular Students ; viz. 20 stipendiary the number to which this class is limitted by Government and 14 free Students.

85. In regard to the classes of the community to which these Students belong, it is an interesting, encouraging and significant fact that there are three Hindoo Students in whose families the profession of medicine is hereditary and whose nearest relations are practitioners according to the Hindoo system of considerable repute. Yet these youths are sent to this College to learn, it is true, the profession of their fathers, but according to a system which they well know to be better and under favourable circumstances which they well know how to appreciate and of which like intelligent men they readily avail themselves.

86. It was among the enlightened anticipations of the distinguished Founder of this School, that the time would come when through its influence the Weids and Hakeems would no longer be satisfied with the scanty and uncertain traditionary knowledge and experience of their fathers but would soon learn to seek for the solid instruction of a systematic and scientific school ; and now we find that the seed of this great social improvement is already sown ; and can we doubt what in the natural course of events must be the issue ? It is vain, I believe to talk of prejudices on

the part of the people of this country against an European system of medicine. That system which best cures disease and alleviates suffering, it matters not what its name may be, must be the most acceptable to people of all castes and all creeds and of all countries. So long as such a healing art is taught in this place there can be no question of the ultimate success and usefulness of this Medical School. But it behoves us well to bear in mind that such a healing art can only be taught so long as the necessary means are fully supplied; and the teachers, and the students are impressed with the grave responsibility which their duties involve.

87. And now with the view of comparison, I would advert to the state of the Bengal Medical College. It has been established about 15 years, and has upon its rolls about 70 first class Indian students, i. e. students, inhabitants of India, whose course of instruction and whose objects are similar to the 31 Students now borne on the rolls of this College. The stipendiary class in the Bengal College is limited to 50, that of this College to 20.

"Students of the first Class of the Medical College of Bengal on obtaining the Diploma of the College shall, if they desire it, be admitted to the Public Service in the rank of Sub-Assistant Surgeon. The following shall be the scale of allowances for each rank.

Under 7 years	Rs.	100
Seven years and under 14	,,	150
Fourteen years and upwards	,,	250"

88. The Students of this College, though the course of education is fully as complete, have as yet no advantage of this kind held out to them. Can there be any question that, if the stipendiary Class in this College were extended to 50, instead of being limited to 20, and the same liberal employment were held out to

its graduates, the numbers on the rolls would be greatly and rapidly increased? I dwell on this subject because I am aware that comparisons of the numbers have been made, and inferences disadvantageous to this Institution have been drawn from them. But surely the circumstances of the two Colleges are so different that the elements of a just comparison do not in reality exist. The steady progress which has been made here under many attendant disadvantages, cannot but be looked upon as sufficiently encouraging, and it cannot be doubted that should these disadvantages come under the consideration of the Hon'ble Court of Directors, they will speedily be removed in accordance with those enlightened views which I find expressed in a Despatch of the Hon'ble Court of Directors, on the subject of the Bengal Medical College, and which is thus recorded in the report of that College, for the year 1848-49.

" *Sub-assistant Surgeons.* In the Annual Report of the College for 1846-47, the causes of the falling off in the disposition of the Native youth for the study of Medicine and Surgery were pointed out and means were suggested by the Council to prevent this by bettering the condition of the Sub-Assistant Surgeon after his admission the public service. The question was referred by Government to the Hon'ble Court of Directors who replied in a Despatch, No. 14 of 1848, dated 4th of April, after referring to the recommendations of the Government, that the scale of allowances to Sub-Assistant Surgeons, should be increased after different terms of service.

Under 7 years Service.....	Rs.	100	per mensum.
7 years and under 14	,,	150	do.
14 do. and upwards.	,,	200	do.

" That they accede to the recommendations of Government and that it is always their desire to provide for the fair remuneration of all classes of their servants and especially of those whose employment must depend on educational success, the result of diligent study and of intellectual powers. The Despatch goes on to state:

" We are aware that Sub-Assistant Surgeons must frequently be required to perform duties of an important nature involving a neces-

sity for great practical knowledge of their profession as well as for skill in its application; The tests which are now established at the Medical College, appear to be sufficiently high, to prevent the admission of men of inferior abilities, and it may therefore be confidently presumed that after obtaining this Diploma the native Student is well fitted for the duties of his profession.

"We shall not now discuss the question of the usefulness of the Sub-Assistant Surgeon if placed in an independant position. There can be no doubt that his services are very valuable under European Superintendence. The Lieutenant Governor of the North Western Provinces writes on this subject as follows:

"In the Medical, as in all other departments, native agency is of the highest value when it is vigilantly superintended. The Sub-Assistant Surgeons in charge of Dispensaries under the immediate eye of Assistant Surgeons, and with the prospect of good native practice in large towns, are most highly useful. In order to the continuance of so useful a body of servants regarded only as an aid to our present medical establishment, we are inclined to extend every reasonable encouragement.

"The desirableness of encouraging natives to overcome their prejudices against educational advancement, and to distinguish themselves in the attainment of that knowledge, the acquisition of which may conduce to their usefulness as Members of Society, no less than to their own moral improvement, cannot indeed be too highly estimated. Nor should it be forgotten that the exhibition of talent and of the reward which its diligent cultivation ensures to the native student will be likely to prove a salutary incitement to emulation among other classes of our servants."

"The permission which you have given to the committees of public instruction at Agra, Delhi and Benares, respectively, to offer to the holders of Senior English Scholarships in the Colleges at these places, the option of proceeding to Calcutta for the purpose of studying medicine in the Medical College, and of retaining their stipends while so employed in addition to the usual College allowance, has our sanction. These liberal conditions will, we hope, tend to overcome the prejudice which the natives of the Northwest Provinces are said to entertain against residence in Bengal.

"It will be judicious to follow the suggestion of the Council of Education, that cases of distinguished merit may be rewarded by immediate advancement to the higher grades of salary. In the constitution of a new service, it is especially important to let it be known, that mere seniority cannot be regarded as constituting so strong a claim to consideration as high attainments, whether the result

of eminent talent or of laborious industry. A laudable spirit of, rivalry will thus be engendered among the Native Students; and though the difficutly of obtaining superiority be enhanced, the position of the whole body of students will be improved and elevated by the competition.

The eminent success which has attended the young men who have lately completed their medical education in this country, under the conduct of Dr. Goodeve, makes us feel anxious that no opportunity should be lost, of inducing Native youths to pursue similar studies, while we are sanguine as to the success of their exertions."

89. I have to apologize for having thus long trespassed on the attention of the Board, but the importance of all these subjects to the well being of the College is so great that I have felt it a duty to enlarge upon them even at the risk of being tedious.

90. I have dwelt upon the disadvantages under which the students of the College temporarily labour; but it is not to be denied that they have also had many and great advantages in having throughout their whole course of study enjoyed the benefit of the sustained and unabated energies and talents of Dr. Peet and Dr. Giraud,—the much valued Colleagues with whom it has been my privilege to be associated since the opening of the College.

C. MOREHEAD,
Sup. G. M. College.

APPENDICES.

APPENDICES.

TO THE

ANNUAL REPORT OF THE GRANT MEDICAL COLLEGE.

FOURTH YEAR. SESSION 1849-50.

APPENDIX. (A)

List of Students in attendance in the Grand Medical College during the Session 1849-50.

No.	Names.	Caste.	Age on admission.	Native Town.	In what School educated.	Date of admission.
	FREE.					
1	Bhawoo Dajee.....	Shenvi.	21	Bombay.	E. Institution....	1st Nov. 1845.
2	Sebastian A. D. Carvalho	Portuguese.	18	do.	Mr. Manwaring's School.....	ditto.
3	Balkrishna Saccharam..	Pulsya.....	16	do.	E. Institution....	15th June 1849.
4	Moreshwar Janardan....	do.	16	do.	ditto	ditto.
5	Hector Summers.....	Anglo Indn.	16	do.	F. Church Inst...	ditto.
6	Nasserwanjee Cursetjee	Parsee.	20	do.	E. Institution....	ditto.
7	Hurrichund Chundroba..	Pulsya.....	20	do.	ditto	ditto.
	STIPENDIARY.					
8	Atmaram Pandurung....	Vyshya.....	21	Bombay.	E. Institution....	1st Nov. 1845.
9	Paul Francis Gomes.....	Portuguese	21	do.	ditto	ditto.
10	Purdoonjee Jemsetjee...	Parsee.....	20	do.	ditto	ditto.
11	Ananta Chundroba.....	Shenvi.....	16	do.	ditto	ditto.
12	J. C. Lisboa.....	Portuguese	19	Goa.....	2d Regt. School.	ditto.
13	Burjorjee Dorabjee.....	Parsee.....	20	Bombay.	E. Institution....	15th June 1846.
14	Dossobhoy Bazunjee....	do..	19	do.	ditto	ditto.
15	Nusserwanjee Bomanjee	do..	16	do.	ditto	ditto.
16	Ardeseer Jemsetjee.....	do..	17	do.	ditto	ditto.
17	Muncherjee Sorabjee...	do.	16	do.	ditto	ditto.
18	Merwanjee Sorabjee....	do..	16	do.	ditto	ditto.
19	Narayan Dajee.....	Shenvi.	16	do.	ditto	15th June 1847.
20	Shamrao Narayan.....	Purbhoo....	16	do.	ditto	ditto.
21	Sadashiva Hemraj.....	Khutri.....	19	do.	ditto	ditto.
22	Balkrishna Chintoba....	Pulsya.....	21	do.	ditto	ditto.
23	Withul Ananta.....	Brahmin. ..	21	Poona...	F. Church Inst...	15th June 1848.
24	Palonjee Pestonjee.....	Parsee.....	17	Bombay.	E. Institution....	ditto.
25	Rustomjee Byramjee....	do.	16	do.	Surat G.E.School	ditto.
26	Rottonjee Hormusjee...	do.	18	Surat....	ditto	15th June 1849.
27	Bala Gopal.....	Brahmin Convert..	18	Poona...	F. Church Inst...	ditto.

APPENDIX. (B)

GRANT MEDICAL COLLEGE.

SESSION 1849—50.

SUMMER TERM.

From 15th June to 15th November.

LECTURES.

On Friday, the 15th June, an introductory Lecture will be delivered by Dr. Giraud at 11 o'clock A. M.

ANATOMY.—*Mr. Peet*.....	Monday.... Wednesday. Saturday....	at 1 P. M.
CHEMISTRY.—*Dr. H. Giraud*.....	Tuesday.... Thursday..	at 12 o'clock.
INSTITUTES OF MEDICINE.—*Dr. C. Morehead*.....	Tuesday.... Thursday..	at 3 P. M.
MATERIA MEDICA.—*Dr. H. Giraud*	Monday.... Wednesday..	at 12 o'clock
SURGERY.—*Mr. Peet*	Tuesday.... Friday.....	at 1 P. M.
PRACTICE OF MEDICINE.—*Dr. C. Morehead.*	Monday .... Friday.	at 3 P. M.
MIDWIFERY.—*Mr. R. D. Peele*....	Monday .... Thursday..	at 1 P. M.
MEDICAL JURISPRUDENCE.—*Dr. W. C. Coles*.....	Wednesday.. Saturday....	at 1 P. M.
CLINICAL SURGERY.—*Mr. Peel*....	Thursday...	at 2 P. M.
CLINICAL MEDICINE.—*Dr. C. Morehead*.....	Wednesday..	at 3 P. M.
PRACTICAL CHEMISTRY.—*Dr. H. Giraud*.....	Friday.	at 11 A. M.

Hospital Attendance.

Clinical Medical Ward, daily at 7 A. M.
Clinical Surgical Ward, daily at 11 A. M.
Dispensary Practice.... daily at 8 A. M.

The 1st and 2nd year Students will attend the Hospital daily at 7 A. M. in rotation for periods of two months, and will be engaged in compounding and dispensing Medicines and acquiring a practical knowledge of the application of bandages and surgical dressings.

Examinations.

Anatomy.....	Thursday	1 P. M.
Chemistry.....	Saturday	11 A. M.
Materia Medica.....	Friday	12 o'clock.
Institutes of Medicine.....	Saturday	3 P. M.
Midwifery.....	Saturday	10 A. M.
Medical Jurisprudence.....	Tuesday	10 A. M.

WINTER TERM.

From 15th of November to 15th of March.

The Lectures and Examinations on *Anatomy, Chemistry, Materia Medica, Surgery, Midwifery, Medical Jurisprudence and Clinical Surgery, also the Hospital Attendance* will be on the same days and hours as during the *Summer Term.*

The following alterations will be made:—

Lectures.

Institutes of Medicine.....	Tuesday..... Thursday.....	2 P. M.
Practice of Medicine.....	Monday..... Friday.....	2 P. M.
Clinical Medicine.....	Wednesday.....	2 P. M.

Examinations.

Institutes of Medicine.....	Saturday.....	2 P. M.

Practical Anatomy.

The dissecting season will be during the Winter Term, and the following are the hours during which the students will be engaged in the dissecting room.

2nd year Students.

From 10 A. M. to 12 o'clock.	From 10 A. M. to 11 A. M.	From 1 P. M. to 2 P. M.	From 1 P. M. to 5 P. M.	From 2 P. M. to 5 P. M.	From 3 P. M. to 5 P. M.
Monday....					Tuesday.
Tuesday. ..	Friday...	Tuesday ..		Monday...	Thursday.
Wednesday.	Saturday.	Thursday..	Friday ..	Wednesday	Saturday.
Thursday ..					

3rd year Students.

From 10 A. M. to 1 P. M.	From 10 A. M. to 12 o'lock.	From 3 P. M. to 5 P. M.
Tuesday.....	Monday.	
Thursday.....	Wednesday	Daily.
Saturday.....	Friday	

The *4th year Students* will dissect at those hours when they are not engaged in the Lecture Room or in the Hospital.

ROLL CALLS.

A general Roll Call of the Students will take place in the College daily at 10 A. M. and 4 P. M.; a Roll Call will also take place before the commencement of each Lecture and examination as well as in the Clinical Wards.

Course of Study for the 1st year Students.

MONDAYS..... Lecture on Anatomy.

TUESDAYS..... Lecture on Chemistry.

WEDNESDAYS..... { Lecture on Anatomy. / Written exercise in Chemistry.

THURSDAYS..... { Lecture on Chemistry. / Examination in Anatomy.

FRIDAYS..... { Written exercise in Anatomy. / Practical Chemistry.

SATURDAYS..... { Examination in Chemistry. / Lecture on Anatomy.

During the hours when not engaged in the Lecture Room, the students wil be occupied in reading and note-taking in the reading room.

Course of study for 2nd year Students.

MONDAYS	Lecture on Anatomy. Lecture on Materia Medica.
TUESDAYS	Lecture on Chemistry. Lecture on the Institutes of Medicine.
WEDNESDAYS	Lecture on Anatomy. Lecture on Materia Medica.
THURSDAYS	Lecture on Chemistry. Lecture on the Institutes of Medicine. Anatomical Examination.
FRIDAYS	Examination in Materia Medica. Practical Chemistry.
SATURDAYS.....	Examination in Chemistry. Lecture on Anatomy. Examination in the Institutes of Medicine.

Practical Anatomy daily during the *Winter Term.*

On the 1st Friday of every month written questions in Anatomy, on the 2nd Friday question in Chemistry ; on the 3rd Friday questions in the Institutes of Medicine, and on the 4th Friday questions in Materia Medica will be proposed. The answers to be written by the Students when most convenient to themselves, and to be delivered to the respective Professors at the Lecture hour on the succeeding Tuesday.

Course of Study for 3rd year Students.

MONDAYS.....	Lecture on Anatomy. Lecture on Materia Medica. Lecture on Practice of Medicine.
TUESDAYS.....	Lecture on the Institutes of Medicine. Lecture on Surgery.
WEDNESDAYS.....	Lecture on Anatomy. Lecture on Materia Medica. Lecture on Clinical Medicine

THURSDAYS	Lecture on the Institutes of Medicine. Lecture on Clinical Surgery.* Anatomical Examination.
FRIDAYS	Lecture or Surgery. Examination in Materia Medica. Lecture on Practice of Medicine.
SATURDAYS	Lecture on Anatomy. Examination in the Institutes of Medicine.

Clinical Medical Ward daily throughout the Session, and *Clinical Surgical Ward* daily during the *Summer Term.*

Practical Anatomy daily during the *Winter Term.*

Course of Study for 4th year Students.

MONDAYS	Lecture on Practice of Medicine Lecture on Midwifery.
TUESDAYS	Lecture on Surgery. Examination in Medical Jurisprudence.
WEDNESDAYS	Lecture on Clinical Medicine. Lecture on Medical Jurisprudence.
THURSDAYS	Lecture on Clinical Surgery. Lecture on Midwifery.
FRIDAYS	Lecture on Practice of Medicine. Lecture on Surgery.
SATURDAYS	Lecture on Medical Jurisprudence. Examination on Midwifery.

Clinical Medical Ward, Clinical Surgical Ward, and Dispensary Practice Daily.

Practical Anatomy daily during the *Winter Term.*

From the 15th March to the 15th April the public examinations for honors and the classification of the Students will be held.

C. MOREHEAD,
Supt. G. M. College.

June, 1849.

During the Summer Term

APPENDIX. (C)

Abstract of Roll-calls for the Session 1849-50.

No.	Names.	Absent	Leave.	Sick.	Total.	Remark.
1	Bhawoo Dajee	..	71	17	81	
2	Atmaram Pandurung	..	11	1	12	
3	Paul Francis Gomes	..	9	11	19	
4	Furdoonjee Jemsetjee	4	26	39	69	
5	Anunta Chundroba	1	15	2	18	
6	Sebastian A. D. Carvalho	1	8	..	9	
7	J. C. Lisboa	1	25	78	104	
8	Burjorjee Dorabjee	3	34	156	193	
9	Doseabhoy Bazanjee	..	38	201	237	
10	Muncherjee Sorabjee	6	33	53	92	
11	Merwanjee Sorabjee	1	20	29	50	
12	Nasserwanjee Bomanjee	..	24	385	409	
13	Ardeseer Jemsetjee	1	49	341	391	
14	Narayan Dajee	..	30	25	55	
15	Shamrao Narayan	1	48	12	61	
16	Sudashew Hemraj	1	35	62	98	
17	Balkrishna Chintoba	..	10	5	15	
18	Rustomjee Byramjee	..	10	18	28	
19	Pallonjee Pestonjee	1	6	1	8	
20	Withul Anunt	5	42	24	71	
21	Moreshwar Junardan	1	9	7	17	
22	Balkrishna Saccharam	2	49	8	59	
23	Ruttonjee Hormusjee	1	2	..	3	
24	Balla Gopal	7	27	66	100	
25	Nasserwanjee Cursetjee	13	56	11	80	
26	Hector Summers	1	5	..	6	
27	Hurrichundra Chundroba	..	..	..	..	

Total No. of Roll-calls, 1,719.

C. Morehead,
Supt. G. M. College

APPENDIX (D).

GRANT MEDICAL COLLEGE.

SYLLABUS OF LECTURES ON THE PRACTICE OF MEDICINE.

This Syllabus of the Course of Lectures on the Practice of Medicine, in order to be rightly understood, should be viewed in connection with that of the Course of Lectures on the Institutes of Medicine, which is also delivered by me in this College.

It will be observed that the subject of *General Pathology* is fully treated of in the Course of the INSTITUTES; therefore, in the present Course, attention is almost exclusively confined to *Special Pathology*. Still the opportunity is often taken of referring the *special* instances to the *general* principles, which they serve to illustrate.

By referring to Division VI of the 2d head of the 1st Lecture, also to (e) Subdivision of the 4th head of the same Lecture, it will be noticed that this Course of Lectures embraces a *fuller* consideration of the diseases of Women and Children, than would seem to be usual in general Courses on the Practice of Medicine. This arrangement has been followed, on principle, as well as for convenience,—because though undoubtedly the actions of the human system in health and disease are somewhat modified by difference of sex and of age,—still I believe it to be a practical evil to attach that importance to these differences, which is apt to be engendered when the diseases of Women and of Children are taught too much apart from the diseases of the adult Male.

C. MOREHEAD.

Grant Medical College,
June 1850.

SYLLABUS OF LECTURES

ON THE

PRACTICE OF MEDICINE;

BY

C. MOREHEAD, M. D.

Lecture I.

1. The nature and object of the Course of the Practice of Medicine, its difference from and relation to the Course of the Institutes of Medicine are explained.

2. The Course is arranged in six divisions.

I. Diseases of the Abdomen.

II. Diseases of the Chest and Vascular System.

III. Diseases of the Brain, the Spinal Cord, Nervous System and Organs of Sense.

IV. Diseases probably dependent on altered constitution of the Blood from mal-assimilation or retention of Excretions.

V. Diseases supposed to proceed from Endemic, Epidemic and Contagious causes.

VI. Female diseases, dependent on Sexual characteristics excluding those dependent on the state of Pregnancy and Parturition.

3. In considering the diseases of the different organs, the following order will be observed :

(*a*). A short notice of those facts of the Anatomy and Physiology of the Organ most important to keep in view in relation to its diseases.

(*b*). The deranged conditions (and their results) of the capillary circulation viz., inflammation, determination and congestion.

(*c*). The deranged conditions (and their consequences) of the nutritive processes, viz., hypertrophy, atrophy, morbid growths, &c.

(*d*). Those functional diseases believed to be independent of deranged capillary circulation or deranged nutritive processes.

4. The facts explained in regard to each disease will be arranged as follows :

(*a*). The symptoms including Diagnosis and Prognosis.

(*b*). Pathology.

(*c*). The causes predisposing and exciting, and, under this head, modifications or varieties of the disease which have relation to the causes will be explained.

(*d*). The treatment preventive and curative.

(*e*). Modifications of the disease depending on difference of sex and difference of age. Under this head the leading peculiarities of the diseases of children will be considered.

5. After these statements, in regard to the order to be observed in treating the subjects of the Course, are made, it is distinctly explained that it is impossible to become Practitioners of Medicine or to become really acquainted with the phenomena of disease from Lectures or Books on the Practice of Medicine. The relation of the Course of Practice of Medicine to Clinical Medicine is also fully stated.

6. The relation of the Practice of Medicine to Surgery and Midwifery is pointed out. They are viewed as conventional subdivisions (made for purposes of convenience) of one extensive subject, the *Healing Art*. The general doctrines of Pathology and Therapeutics, as taught in the course of the Institutes of Medicine, are equally applicable to all.

Lecture II.

1st. The diseases of the ABDOMEN are commenced with a reference to the Anatomical division of the cavity into different regions.

2d. The diseases of the Peritoneum are first treated of, commencing with *Acute General Peritonitis;* and before the subject is entered upon, attention is called to some of the important facts taught in the Institutes of Medicine, relating to different kinds of inflammation and to the nature of symptoms and signs.

3rd. The local, general, diagnostic and prognostic symptoms of Acute Peritonitis are then stated, followed by an account of the morbid appearances found after death in fatal cases, and their relation to the different kinds of symptoms.

4th. The causes are then considered, and those chiefly dwelt upon are, 1st Depressions of external temperature. 2d Mechanical causes, (blows, bruises, penetrating wounds). 3d Foreign matters escaping into the cavity of the peritoneum from the hollow organs which it invests.

5. The treatment of the disease is then explained and the modifications incident to it—from difference of sex and—age are shortly adverted to.

Lecture III.

1. The subject of Peritonitis is continued. The *secondary inflammations* of the peritoneum, general and partial, consequent on other lesions of the abdominal viscera e. g. intestinal ulcerations, abscess in the Liver, &c., are then noticed and some remarks are made on the subject of *partial Peritonitis*.

2. *Latent Peritonitis*, *Erysipelatous Peritonitis* are shortly considered and the subject of *Puerperal Peritonitis* is alluded to.

3. *Chronic Peritonitis* is then treated of and divided into 1st, that form consecutive on acute Peritonitis. 2d, Tubercular Peritonitis. 3d, It is enquired whether there is a chronic Peritonitis, of the ordinary form, and not consecutive on an acute attack: affirmative facts are stated. The symptoms, the morbid anatomy and treatment of chronic Peritonitis are noticed.

Lecture IV.

1. Inflammation of the peritoneum having been considered, determination and congestion and their results, fall next to be treated of.

2. The only diseases of importance, which can be discussed under this head, are the different forms of abdominal dropsy, *Ascites*.

3. Ascites is subdivided into *idiopathic* and *symptomatic*, *sthenic* and *asthenic*, *idiopathic sthenic Ascites* and *idiopathic asthenic Ascites* and then *symptomatic Ascites* are explained.

4. The symptoms, pathology, causes and treatment are considered in relation to each form of the disease.

Lecture V.

1. In continuation of the diseases of the peritoneum its perversions of nutrition are next considered. Under this head, *Cancerous degenerations* and *Hydatid formations* are treated of—Cartilaginous thickening and tubercular deposition having been discussed with the morbid anatomy of chronic Peritonitis.

1. The diseases of the *Stomach* fall next under consideration. The subject is commenced with a short notice of some of the important facts in relation to the anatomy and physiology of the organ.

3. The inflammatory diseases are first treated of viz., *Gastritis* acute and chronic. The symptoms, the pathology, the causes and the treatment are explained, and allusion is made to any modifications that may exist in relation to difference of sex and age.

Lecture VI.

1. Having completed the inflammatory diseases of the Stomach, those dependant on determination and congestion of blood, fall next to be considered.

2. Under this head, *Gastric Hæmorrhage, Hæmatemesis,* is treated of and the following forms of the disease are in succession discussed. 1st An acute form more related to determination than congestion. 2d Symptomatic of obstructed circulation of the Liver or Spleen, or other abdominal viscus. 3d Symptomatic of an enfeebled state of the constitution (Cachexia) generally with deteriorated condition of the blood. 4th Vicarious of other hœmorrhages. 5th Though these are the forms of Gastric Hœmorrhage, related to determination and congestion, the proper subjects for consideration in the present lecture, yet attention is called to the fact that there may be hœmorrhages from the Stomach, from other conditions, as inflammation, ulceration, rupture of an aneurismal tumour &c.

3. The four first forms of Gastric hœmorrhage are considered in relation to symptoms, pathology, causes and treatment.

4. Modifications in relation to difference of sex and age are alluded to.

5. The perversions of nutrition of the Stomach are next treated of, and under this head, *Cancerous degenerations* of the Stomach are considered, in relation to symptoms, pathology, causes and treatment.

Lecture VII.

1. The functional diseases of the Stomach are now considered and under this head, the disease termed *dyspepsia* or indigestion is treated of.

2. The disease is stated to be related to derangement of the secretory processes of the Stomach, and of the irritability of its muscular fibre. Two forms of the disease are discussed,—*atonic* and *irritative dyspepsia.* The former related to defect, the latter to excess of action. The former is considered chiefly in its relation to a general state of atony of the system. The latter is often consecutive on the former, but sometimes independent of it.

3. The subject is discussed in relation to symptoms, pathology, causes, treatment, sex and age; but general principles rather than details are inculcated.

Lecture VIII.

1. The diseases of the *Intestinal Canal* are now entered upon, with a short notice of some of the important anatomical and physiological facts which relate to the peristaltic action of the viscus.

2. Diseases which are believed chiefly to depend on deranged action of the muscular coat of the intestinal canal—(for the most part the small intestine it is believed) are first considered, under this head, *Colic*, *Ileus*, *Colica Pictonum* and *Enteritis* are treated of, and they are discussed in relation to the general pathology of muscular fibre, and to the physiological action of the muscular fibre of the intestinal canal.

3. Each disease is explained with reference to symptoms, pathology, causes, treatment, sex and age.

Lecture IX.

1. The diseases of the *mucuos membrane*, of the intestinal canal, are entered upon, and prefaced by a short allusion to the anatomical and physiological facts which it is important to keep in view.

2. The inflammatory diseases of the Mucous Membrane of the small intestines are treated of under the title of *Muco-enteritis* and of this, *Duodenitis*, *Gastro-enteritis*, and *Ileo-Colitis* are considered as varieties, depending on situation or complication.

3. In discussing these diseases, an acute, a chronic, a sthenic, an asthenic, an idiopathic and a secondary form are kept in view.

4. The symptoms, the pathology, the causes and treatment of muco-enteritis are explained.

5. The frequency and importance of the disease in infancy and early child-hood are stated. The symptoms, pathology and treatment in relation to the early periods of life, set-forth.

Lecture X.

1. Inflammation of the mucous membrane of the large intestine, *Dysentery, Colitis* is now considered.

2. The disease in its acute and chronic forms is treated of; and its further varieties are stated chiefly to depend on the part of the intestine that is affected and on the character and conditions of the general constitution of the individual suffering—and the circumstance of complication or not with derangement of other organs.

3. The symptoms, the morbid anatomy, the causes and treatment of Dysentery are explained.

Lecture XI

1 Inflammation of the mucous membrane of the intestinal canal having been considered, determination and congestion of blood, and their results as occurring in this tissue are now treated of; and under this division, the disease termed *Diarrhœa* is discussed.

2. An acute and chronic form of the disease also varieties to which the names *feculent*, *bilious*, *serous* and *mucous* have been given are each successively the subjects of comment.

4. Diarrhœa in its several forms is explained in relation to symptoms, pathology, causes, treatment, and the period of infancy and child hood.

4. A short allusion is made to the disease called *Tubes Mesenterica*, and its relation to deranged conditions of the intestinal mucous lining.

Lecture XII.

1. Having concluded at last lecture the consideration of a disease, much of whose pathology consists in increased excretion from the intestinal canal, it will be convenient to treat now of the opposite state of the viscus, with regard to excretion,—viz., *Constipation*. This disease is discussed with reference to symptoms, pathology, causes, and treatment.

2. The subject of determination and congestion of blood to the intestinal mucous lining, is now reverted to and the further results of these states are considered under this head, *intestinal hæmorrhage*, (*Melæna*) is treated of in relation to symptoms, pathology, causes, and treatment.

3. The disease called *Hæmŏrrhoids* is shortly explained and the Lecture concludes with a notice of the symptoms and treatment of the most common intestinal *Entozoa*. The pathology and causes of Entozoa having been already treated of in Lecture XL of the Course of the Institutes of medicine.

Lecture XIII.

1. The diseases of the *Liver*, fall next to be considered and the subject is commenced by shortly referring to the facts of the descriptive and general anatomy and physiology of the organ, which it is important to keep in mind, in relation to its diseased states.

2. Acute inflammation of the Liver, *Acute Hepatitis*, is first treated of and the symptoms local, general, diagnostic and prognostic, and the physical signs are carefully explained.

Lecture XIV.

1. The pathology of acute Hepatitis is entered upon and under this head, the subject of *Hepatic Abscess*, is treated of. The symptoms, the mode of formation, the different kinds of progress and termination of hepatic abscess are severally discussed.

2. The causes predisposing and exciting of Hepatitis are now explained and under this division, the subject of *secondary* Hepatitis and hepatic abscess *secondary* on injuries, and on dysentery, are considered.

Lecture XV.

1. The treatment of acute Hepatitis is explained.

2. The subject of *Chronic Hepatitis* including the disease called (*Cirrhosis*) is next considered, and discussed in relation to symptoms, pathology and treatment.

3. Having concluded the inflammatory diseases of the Liver, determination of blood and congestion of blood in the Liver are respectively considered in relation to their symptoms, pathology, causes and treatment.

Lecture XVI.

1. Having concluded the diseases, believed to be dependent on inflammation, determination or congestion of blood in the Liver, the structural diseases attributed to perversion of nutrition and secretion are next considered.

2. Under this head, *fatty degeneration of the Liver*, *serofulous enlargement*, *carcinomatous degeneration* and *hydatid formations* are treated of in relation to symptoms, pathology, causes and treatment.

Lecture XVII.

1. The diseases of the *Gall-Bladder* and of the *biliary ducts* are now considered and under this head, inflammation of the gall-bladder and cystic duct, of the hepatic and common duct, as well as atony and spasm of these structures, are treated of. The nature of *biliary calculi* is then explained, and the lecture concludes with a general notice of *Jaundice*.

2. All these diseases are explained in relation to symptoms, pathology, causes and treatment, more or less fully according to their respective importance and frequency.

Lecture XVIII.

1. The diseases of the *Spleen*, fall next to be considered and the subject is commenced with a short notice of the anatomy and physiology of the organ.

2. Inflammation of the spleen, *Splenitis* and the various forms of enlargement of the organ are treated of, in relation to symptoms, pathology, causes and treatment, and the relation of enlarged spleen to *malarious cachexia*, is fully explained.

3. The diseases of the *Pancreas*, inflammation and the various forms of perversions of nutrition are made the subject of a short and general notice.

Lecture XIX.

1. The diseases of the *Kidney* are now entered upon with a short notice of the important facts in regard to the anatomy and physiology of the organ.

2. The inflammatory diseases are first treated of. Their division into *Nephritis, Pyelitis, Pyelo-Nephritis* is stated and a short explanation is made of the general character of the symptoms of these affections.

3. Acute and chronic simple Nephritis, also acute and chronic, Pyelitis are then considered in relation to symptoms, pathology and treatment.

Lecture XX.

Bright's disease of the *Kidney* is considered, the relation of this disease to urine, albuminous and of low specific gravity, to an altered condition of the blood, to secondary dropsical and inflammatory affections, is explained.

The morbid anatomy of the disease is dicussed, and under the head "treatment," the management of the secondary dropsical and inflammatory complications is chiefly dwelt upon.

Hydatid formations, cancerous degenerations and the formation of *cysts in the Kidney* are shortly alluded to.

Lecture XXI.

The diseases of the Kidney were completed at last lecture, but there remain to be considered certain deranged conditions of the urine, some of them perhaps attributable in part to deranged action of the Kidney, others of them attributable to derangements in the processes of assimilation.

Under this head *chylo-serous* or *chylous urine*, *ischuria renalis*, *diuresis*, *diabetes*, the *oxalic acid diathesis*, the *uric acid diathesis* and the *phosphatic diathesis* are considered in relation to symptoms, pathology and treatment.

Lecture XXII.

In continuing the derangement of the urinary excretion, the subject of *renal calculi* and *nephraliga* and *hæmaturia* are treated.

Cystits, inflammation of the bladder is then considered in relation to its symptoms, pathology, causes and treatment.

Having now completed the diseases of the abdomen, those of the *mouth* and *throat* are entered upon with a short notice of the important anatomical and physiological facts, including *dentition*.

The inflammatory diseases of the mouth are first considered and *Stomatitis apthosa*, *mercurialis* and *ulcerosa* are explained in relation to symptoms, pathology, causes and treatment.

Lecture XXIII.

1. In continuing the diseases of the mouth and throat, *Gangræna oris* is first considered. Then *Glossitis*, and *Parotitis* specific and common are treated of.

2. The diseases of the throat are then entered upon and explained under the heads, *Angina diffusa*, (*Pharyngitis*) *Angina membrancea* (*Diptheritis*) *Angina maligna* and *Angina* or *Cynanche tonsillaris*.

3. *Syphilitic affections* of the throat are alluded to and the lecture terminates with a short notice of the diseases of the *Œsophagus*.

Lecture XXIV.

The diseases of the *Larynx* and *Trachea* are commenced. *Laryngitis*, inflammation of the Larynx is first considered. 1st in its acute idiopathic sthenic form. 2d In its asthenic forms—consecutive on inflammations of the throat, erysipelas, eruptive fevers, &c.

The *Chronic* forms of the disease, the simple, that related to secondary Syphilis and to Phthisis Pulmonalis are then treated of.

Lecture XXV.

Cynanche trachealis—Croup is explained in relation to its milder and severer forms; and the combination of inflammatory action and spasm in its pathology is dwelt upon.

The forms of the disease consequent on Diptheritis are adverted to.

Spasm of the glottis, (*Laryngismus stridulus*) *Croup* disease of infants is then considered. The symptoms are shortly stated, the pathology and causes explained and the principles of treatment set-forth.

Lecture XXVI.

In commencing the diseases of the *Lungs* short allusion is made to the facts of anatomy and physiology which have chiefly reference to the pathological states.

The physical signs of diseases of the Lungs having been noticed generally in one of the early Clinical Lectures, are not again considered, in a general manner.

Inflammation of the mucous membrane of the bronchial tubes is first considered, and under this head, *Coryza* and *Catarrh* are shortly explained.

Then *Bronchitis* acute, sthenic and asthenic and chronic is treated of in relation to the symptoms, pathology, causes and treatment, and to modifications from difference of age.

Lecture XXVII.

1. Having considered the inflammations of the bronchial mucous lining, the results of congestion, serous transudation and hæmorrhage ought next to be treated of, but it will be more convenient to consider the former in connection with Asthma and the latter with diseases of the pulmonary parenchyma.

2s *Structural lesions* of the bronchial tubes, *constriction, obstruction* and *dilatation* are fully explained.

3. The *functional diseases* of the bronchial tubes fall next to be considered and under this head, *Asthma* is treated of. It is viewed as partly consisting of spasm of the bronchial muscular fibres, and partly of irritation of the bronchial mucous lining; and the varieties of the idiopathic form are related to the greater or less degree of these conditions.

Lecture XXVIII.

In continuing the functional diseases of the bronchial tubes, *Hooping cough, Pertussis* is considered. Its symptoms, pathology, etiology and treatment are explained.

2. The diseases of the *Pleura* are next entered upon and inflammation of this membrane *Pleuritis* is commenced. The symptoms of the acute form of the disease are stated.

Lecture XXIX.

The subject of *pleuritis* is continued, and is considered in relation to its *chronic* form, and its *sthenic* and *asthenic* varieties. The pathology and treatment are explained with reference to these modifications, and the lecture concludes with a short notice of *pleurodynia* and *hydro-thorax*.

Lecture XXX.

The diseases of the substance of the lung are now entered upon, and a short notice is first taken of the constituent textures of the organ. Inflammation of the substance of the lung, *pneumonia* is commenced. The general symptoms, the physical signs, the diagnosis and prognosis, as occurring in the sthenic and asthenic varieties of the acute form of the disease, are explained.

Lecture XXXI.

The subject of pneumonia is continued; and in considering the pathology of the disease, the morbid appearances presented in the different stages, in the sthenic, asthenic and chronic forms, are noticed; and reference is made to the division of the disease into lobar, lobular and vesicular varieties. The causes and treatment of pneumonia in its several forms and varieties are explained, and allusion is made to the modifications of the disease as occurring in infancy and child-hood.

Lecture XXXII.

In continuing the diseases of the pulmonary parenchyma, dilatation of the air-cells, *pulmonary emphysema*, is next considered. The pathology, the symptoms and signs and the causes of this derangement are explained, and the distinction between vesicular and interlobular emphysema pointed out.

The diseases of the pulmonary parenchyma, depending upon congestion of blood, are now entered upon, and under this head, pulmonary hœmorrhage—*hæmoptysis, pulmonary apoplexy*—are treated of in relation to symptoms, pathology, causes and treatment, and the lecture concludes with a short notice of *pulmonary œdema*.

Lecture XXXIII.

The consideration of those diseases of the lungs which depend on a perverted state of nutrition, is entered upon and *phthisis pulmonalis*, tubercular phthisis is first treated of.

The subject is commenced with a short allusion to the general pathology of scrofulous inflammation.

The division of phthisis pulmonalis into three stages, the patho-

logical state of the lung in each stage, the symptoms and signs indicative of these stages are then explained in succession.

Lecture XXXIV.

In continuing the subject of phthisis pulmonalis, the causes and treatment of the disease are considered, and its relation to difference of sex and of age is noticed.

The nature of *pneumo-thorax* is shortly explained, and allusion is made to *carcinomatous* and *melanotic* disease of the lungs; and this completes the subject of the diseases of the air-passages and lungs.

Lecture XXXV.

The diseases of the *heart* fall next to be considered. The anatomical relations of the heart and its different parts to the external parietes of the chest, are first stated,

The character of the sounds and impulse of the heart, in the state of health, are explained.

The deviations of these, which constitute the physical signs of diseases of the heart, are then treated of,—under the heads of different degrees of the sounds and of the impulse, and murmurs exocardial and endocardial.

The latter (endo-cardial) both as dependent on organic disease, and altered conditions of the blood—without structural disease of the organ.

Lecture XXXVI.

Pericarditis—inflammation of the pericardium is the first disease of the heart that is considered.

The importance of the disease in relation to the rheumatic diathesis and to forms of cachexia, is explained.

The symptoms, the pathology, the causes and treatment of the disease, in relation to sthenic and asthenic forms, are stated in some detail.

Lecture XXXVII.

Endocarditis, inflammation of the lining membrane of the heart, is next treated of. Its importance and relation to pericarditis are explained.

The symptoms, the pathology, the causes and treatment of the disease are respectively considered, and reference is made to pericarditis and endocarditis, in relation to difference of sex, and different periods of life. *Carditis*—inflammation of the substance of the heart is shortly noticed

Lecture XXXVIII.

Having completed the consideration of the inflammatory diseases of the heart, those dependent on deranged nutrition are next treated of.

1st. Organic diseases of the valves of the heart, in part not traceable to inflammation are first noticed.

The several forms of *hypertrophy* of the heart, are discussed with reference to the pathology, causes, symptoms, and physical signs. *Dilatation* of the cavities of the heart, then receives a similar consideration, and the lecture concludes with a short notice of *atrophy* of the heart, and of *cyanosis* or morbus cœruleus.

Lecture XXXIX.

The diseases of nutrition of the heart were considered as last lecture. The functional diseases of the organ form the subject of the present one.

Palpitation of the heart, (excessive action) is first treated of in relation to symptoms, pathology, causes and treatment. Its dependence on plethoric and anæmic states of the system, on deranged nervous influence and sympathy with other organs is then explained.

2. *Syncope* (defective or suspended action) is next considered, in all its important relations, and the lecture concludes with an account of *angina pectoris*, neuralgia of the heart.

Lecture XL.

The diseases of the heart having been completed those of the vascular system are entered upon. *Arteritis*—inflammation of the arteries, general, partial, acute and chronic is shortly noticed.

The most common perversions of nutrition viz., *semi cartilaginous, atheromatous* and *ossific* deposits in the walls of arteries are then stated.

Aneurism, its nature is shortly explained and then aneurism of the thoracic and abdominal aorta is treated of, in relation to symptoms, signs, pathology and causes.

Phlebitis, inflammation of the veins is then considered and its great importance, in relation to several serious pathological states is pointed out.

Inflammation of the lymphatics, *Angioleucitis* is alluded to.

Lecture XLI.

Divisions, I and II of the course have been completed, and Division III, diseases of the *brain, spinal cord*, and *nervous system* is entered upon.

1. A short allusion is made to the anatomical and physiological facts, which it is important to keep in view, while considering the diseases of the brain.

2. The character of the symptoms, on which we are dependent for our knowledge of diseases of the brain, is explained, and compared with that of the diseases of the abdomen and chest. The want of precision of the former is pointed out.

3. The inflammatory diseases of the brain are first considered, and the subject is commenced with a short general notice of their pathology, and of the several trains of symptoms under which they generally present themselves.

Lecture XLII.

The consideration of the inflammations of the several contents of the cranium is entered upon.

1. Inflammation of the *dura mater* is considered, in relation to symptoms and pathology.

2. Inflammation of the *arachnoid* and *pia mater—meningitis*, inflammation of the cerebral substance, *cerebritis* are treated of, in relation to symptoms and pathology, but no attempt is made precisely to distinguish the symptoms of meningitis from those of cerebritis; nor is *arachnitis* treated of as a separate inflammation.

Lecture XLIII.

1. General inflammation of the membranes and substance of the brain, under the name *phrenitis* or *encephalitis* is considered in relation to symptoms and pathology.

2. Scrofulous inflammation of the brain and membranes, the disease known by the names *acute hydrocephalus* is next treated of, and its symptoms and pathology explained.

3. The causes and treatment of all forms of inflammation of the contents of the cranium are considered.

Lecture XLIV.

Having completed the consideration of the inflammations of the contents of the cranium, determination of blood and congestion of blood in the encephalon, are next treated of. This includes cerebral hæmorrhage, and some forms of serous effusion. In relation to cerebral congestion and its consequences, the disease called *Apoplexy*, simple, serous, sanguineous, is explaned in relation to symptoms, pathology, causes and treatment.

Lecture XLV.

Chronic hydrocephalus is first considered. Having completed the diseases dependent on deranged capillary circulation and its

results, those proceeding from altered states of the nutritive processes are then entered upon—and *hypertrophy* of the brain, and occurrence of morbid growths in the encephalon are treated of in relation to symptoms, pathology and treatment.

The functional diseases of the encephalon, not traceable distinctly to altered distributions of the blood or altered states of nutrition, fall next to be treated of, in relation to symptoms, pathology and treatment.

The functional diseases of the encephalon, not traceable distinctly to altered distributions of the blood, or altered states of nutrition, fall next to be treated of, and in passing to this series it is convenient to consider the disease called *delirium tremens*.

Its division into 2 species, and the second species into 3 stages is explained.

The symptoms, pathology and treatment of the disease are severally discussed.

Lecture XLIV.

Some forms of functional disease of the brain are now considered and first those forms of headache, *cephalalgia* not depending on inflammation, or organic disease of the brain are treated of.

The general principles of their pathology and treatment are explained.

The subject of *Insanity* receives a short and passing notice.

The diseases of the *spinal cord*, are then commenced with a short notice of those anatomical and physiological facts, relating to the spinal cord, which it is important to bear in mind.

Spinal meningitis and *myelitis*, inflammation of the membranes and substance of the cord, are separately considered in relation to symptoms and pathology, but conjointly in relation to causes and treatment.

Lecture XLVII.

Having completed the inflammatory diseases of the spinal cord, *hæmorrhage* and *dropsy* of the spinal cord are noticed under the names *spinal apoplexy*, *hydro-rachis*, and *spina bifida*.

Spinal irritation as a functional derangement of the spinal cord, is then treated of.

Tetanus, in its several forms in relation to symptoms, pathology, causes, and treatment is then considered; and the lecture concludes with a short notice of *hydrophobia*, chiefly of the pathology of the disease. Its full consideration forms part of the course of Surgery.

Lecture XLVIII.

There are still functional derangements which not being, as far as can be determined, exclusively confined to the encephalon or to the spinal cord, it is appropriate to consider under the head of functional derangements of the *Nervous System.*

Of these *epilepsy* is first considered in relation to its symptoms, pathology, causes and treatment.

From epilepsy, the transition is natural to *infantile convulsions*, and this subject is treated with some fulness in relation to all important points.

Puerperal convulsions in their full consideration form part of the course of midwifery, but the close relation of much of their pathology, and of the principles of treatment to infantile convulsions is here explained.

Lecture XLIX.

In concluding the functional diseases of the nervous system, *Hysteria* is next considered. Its varied symptoms, its relation to a particular diathesis, the nature of the causes, the indications to be observed in its treatment, are all explained rather with reference to general principles than by the statement of copious details.

Tetanus, epilepsy, infantile and puerperal convulsions and hysteria, have been instances of the excess of the motor influence of the nervous system. We now come to consider functional diseases of the nervous system, in which motor influence is defective perverted or suspended, and under this head *chorea* is treated of in relation to symptoms, pathology, causes and treatment.

Lecture L.

Paralysis agitans, mercurial tremors and *lead palsy* are shortly noticed as further instances of defect of motor influence.

Then, suspension more or less complete of motor influence is next considered as exemplified in the different forms of paralysis. *Hemiplegia, paraplegia* and *local paralysis*, depending on congestion or inflammatory derangement of the brain or spinal cord are again adverted to.

Functional paralysis in relation to infancy and old age, and consecutive on epilepsy, hysteria and chorea, is then treated of.

Neuralgia and *anæsthesia* are then discussed, and are viewed as having the same relation to the sensory afferent portion of the nervous system, as convulsion and paralysis have to the efferent portion. The first involving excess of influence, the second defect or suspension.

As related to the subject of anœsthesia, *amaurosis* is shortly considered.

As time will not admit of much illustration of these important subjects, the attempt is made in this lecture to make these deranged states of the nervous system intelligible, by dwelling on those principles of their pathology, causes and treatment which are common to several; and also by keeping constantly in view, the physiology of the nervous system as now generally received.

Lecture LI.

Having completed the diseases of the nervous systems those of the organs of sense fall next to be considered.

The diseases of the *eye* will be noticed in the course of surgery.

Of diseases of the ear, *otitis*, external, internal, acute, chronic is shortly noticed.

Epistaxis is the only disease of the *nose* which is explained.

The diseases of the *tongue* were noticed in connection with those of the mouth.

The diseases of the *skin* are then entered upon. But it is impracticable, within the limits of the course, to enter into the details of this extensive subject. It is therefore merely viewed in relation to certain general principles.

1. It is stated that the diseases of the skin are chiefly inflammations.

2. That much of the classification is grounded on the character, extent, situation, and, above all, the result of the inflammation—whence has arisen the division into 7 orders viz , Exanthemata, Papulæ, Squamæ, Vesiculæ, Bullæ, Pustulæ, Tubercula ; and these into many species.

3. That states of the constitution from plethora, cachexia, age, the presence of a materies morbi in the blood, the derangement of organic functions, &c., of the stomach, the bowels, the kidneys, have much to do with the pathology of skin diseases.

They are inflammations, secondary on one or other of these deranged conditions.

4. Amongst causes, external irritants, heat, inattention to cleanliness, contagion, are instanced.

5. The general indications to be kept in view in the treatment, both general and local are explained. The eruptive fevers, the syphilitic eruptions are reserved for after consideration

Lecture LII.

The diseases of the three first divisions, of the course having been considered, those of Division IV, viz., those dependent on an altered state of the *blood*, are now entered upon.

The first disease treated of in this division *is rheumatism* in its acute and chronic forms, its fibrous, synovial and muscular varieties These are all explained in relation to symptoms, pathology, cause and treatment.

Gout is the next subject of consideration, the symptoms are described, its division into regular, irregular and retro-cedent gout is stated; and the pathology, the causes, and the treatment of the disease are discussed.

Lecture LIII.

Scurvy, Scorbutus forms the next subject of consideration. The symptoms are described, the pathology and causes explained, and the preventive and curative measures set forth, and the notice of the disease concludes with a short account of *its* history.

Purpura hæmorrhagica, is then treated of, in relation to symptoms, pathology and treatment.

Lecture LIV.

Beriberi is next treated of, and it is classed in the present division, because it is looked upon as a general dropsy excited, by external cold, in individuals predisposed, in consequence of a developing scorbutic diathesis.

2. Tubercular lepra, *leprosy*, is next considered, its symptoms and diagnostic marks are explained, and the pathology and causes so far as they are understood are stated; and notice is taken of the history of the disease, its former prevalence in European countries, &c.

Elephantiasis is then described and discussed, with reference to symptoms, pathology, causes and treatment.

That it is a disease altogether different from tubercular lepra or leprosy is particularly explained.

Lecture LV.

1. The general subject of *cachexia* is discussed, and reference is made to cachexia from deficient food, impure air, malaria, also to the scrofulous, scorbutic, syphilitic, leprous, carcinomatous and mercurial cachexias.

Those phenomena, which are more or less common to all, are pointed out; then the chief circumstances in which they differ from each other are explained.

The general principles to be observed, in the prevention and cure of these cachexias, are stated; and the question of the treatment of syphilis with, or without mercury is considered.

Lecture LVI.

The diseases of Division V of the course—those supposed to proceed from endemic, contagious and epidemic causes are now entered upon.

Intermittent Fever is first considered. The symptoms, the different forms of the disease, and their varieties are described.

The *quotidian*, *tertian* and *quartan* types, and as varieties of these, double and duplicated tertian, double and duplicated quartan, simple and complicated intermittent fever, are alluded to.

The pathology, causes and treatment of intermittent fever, are treated of in some detail.

Lecture LVII.

In continuation of diseases depending on endemic causes, *remittent fever* is next considered, and the following forms are severally noticed *simple*, *inflammatory*, *bilious*, and *congestive* remittent fever—*typhoid* or *adynamic*, and *malignant* remittent, also remittent fever complicated with internal inflammations, and with jaundice.

The various forms of remittent fever are considered in relation to symptoms, and pathology, and in the general notice of the treatment, with which the lecture concludes, reference is made to the modifications required in the most important of these forms.

Lecture LVIII.

It is convenient, though not in the strict order of the arrangement of the course, to consider, before proceeding to notice the diseases depending on infectious causes, certain forms of idiopathic fever, produced by one or more of the ordinary exciting causes of disease.

Ephemeral fever,—The *continued inflammatory* or *ardent fever* of tropical countries, are viewed as of this nature—and are here explained in relation to symptoms, pathology, and treatment.

The diseases depending upon infectious causes, are now entered upon, and the *continued fever* of the colder climates, in its forms of *synocha*, *synochus* and *typhus*, is treated of in relation to symptoms, pathology, causes, and treatment. But as the disease is unknown in tropical countries, it is not discussed in much detail.

It is now enquired whether the intermittent, remittent, and continued forms of fever exhibit modifications, when they occur in the early periods of life; and in the course of the enquiry the nature of *Infantile remittent fever* is explained.

Lecture LIX.

In continuing the consideration of the diseases, believed to be dependent on infectious causes, the *plague* is next treated of. The countries in which it prevails are mentioned, a general description of the symptoms given, and the opinions entertained of its causes are shortly stated.

Allusion is then made to a very fatal febrile disease which prevailed in Cutch and Kattyawar, and parts of Guzerat from 1815 to 1820, and again in Marwar and Meywar, in 1836 and 1837; and which on the latter occasion broke out at Pali, in regard to which the question was at the time raised of its identity or not with the plague.

Yellow fever is next treated of. The countries in which it prevails, the symptoms which it exhibits, the opinions entertained of its origin and mode of propagation, and its method of treatment are shortly explained.

Lecture LX.

The *small-pox, variola is* next considered. The symptoms as they present themselves in the *distinct* and *confluent* forms of the disease are explained. The diagnosis and prognosis are stated and the pathology, and causes are shortly noticed.

The prevention of small-pox by vaccination was fully treated of in lectures LVI and LVII of the course of the Institutes of Medicine, and is not now again entered upon.

The lecture concludes with a general notice of the principles which guide the treatment of small-pox.

Lecture LXI.

In continuing the diseases depending on infectious causes, the *chicken-pox, varicella,* is next to be considered. Then *measles, rubeola* in its three forms, *rubeola vulgaris, rubeola sine catarrho, rubeola maligna,* is treated of in relation to symptoms, pathology, causes, and treatment.

Scarlatina, scarlet fever, is next noticed and its nature explained with reference to its three principal varieties, *scarlatina simplex, scarlatina anginosa,* and *scarlatina maligna.*

Lecture LXII.

The subject of *erysipelatous inflammation* is now considered, and the reasons are explained, why it is treated of in connection with eruptive fevers, and infectious causes.

A general statement is made in regard to the different forms of erysipelatous inflammation; the simple, the œdematous, the phlegmonous and gangrenous are alluded to. The division into traumatic and idiopathic is also noticed. The former depending on wounds and injuries is treated of in the course of surgery. The latter is almost confined to the face and head. The present lecture then is chiefly on erysipelas of the face and head.

In explaining the pathology of erysipelas, much importance is attached to a peculiar state of predisposition of the system, as explanatory of the character of the inflammatory and febrile phenomena.

The lecture concludes with a short notice of the cutaneous inflammations called *erythema*, with the view of distinguishing it from erysipelatous inflammation.

Lecture LXIII.

Epidemic Cholera is now considered. The symptoms, the pathology, the causes and the treatment are in succession explained; and illustrations are chiefly drawn from observations made on the disease, as it has presented itself of late years in Bombay.

Lecture LXIV.

It is convenient to treat of *bilious cholera* in the present lecture with the view of marking the difference between it, and epidemic cholera. It is considered first as occurring in the adult period of life; and then in the period of infancy, under the designation of *cholera infantum*.

The prostration of strength, which so often attends the occurrence of cholera in infancy, gives occasion to allude generally to the *hydrocephatoid* phenomena which arise in states of exhaustion in the early periods of life.

The present division of the course is concluded with a short notice of the *epidemic influenza*.

Lecture LXV.

Division VI of the course is commenced viz. *Female diseases* dependent on sexual characteristics excluding those dependent on the state of pregnancy and parturition.

The influence exercised on the female system generally, by the development of the reproductive organs at the period of purberty, and the relation mutually subsisting between the functions of these organs, and the general functions, organic and animal, are explained.

The diseases of the unimpregnated uterus will be first treated of; but before entering upon their consideration, some general observa-

tions are made on the functions of the organ in this condition i. e. on menstruation.

Lecture LXVI.

As intimately connected with defective development or subsequent structual unfitness of the reproductive organs, the disease *chlorosis* is first treated of. The symptoms, the pathology, the causes, the treatment are explained.

Amenorrhœa, or absence of menstruation is next considered, under its two divisions of amenorrhœa of retention, and amenorrhœa of suppression. The relation of both to plethoric and anœmic states of the constitution is stated, and all the other important particulars of the disease are duly noticed.

Lecture LXVII.

Vicarious menstruation, is shortly adverted to. Then *dysmenorrhœa*, difficult menstruation, and *menorrhagia* or profuse menstruation or hœmorrhage from the unimpregnated uterus, are treated of, in relation to symptoms, pathology, causes, and treatment.

Their probable, not infrequent, dependence on inflammation and its results of the cervix and os-uteri is noticed.

The subject of *Leucorrhœa*, is then adverted to. It is looked upon as a symptom, not as a substantive disease, and the attempt is made to explain, how it has happened that leucorrhœa has so very generally been viewed as a distinct disease. It is finally stated that mucous, sero-mucous, and muco-puriform vaginal discharges, will be alluded to in relation to the inflammations, acute and chronic, of the uterus and its appendages, on which they are attendant phenomena.

Lecture LXVIII.

Before entering upon the consideration of the inflammatory diseases of the unimpregnated uterus, notice is taken of the principal anatomical facts which it is important to bear in mind, in order to a just appreciation of the physical signs of uterine disease.

The general character of the physical signs of disease of the uterus, and the manner in which they are ascertained by touch, and the use of the speculum are shortly stated.

Acute *metritis, hysteritis* is discussed shortly; its chief consideration, having relation to the puerperal state, will be entered upon in the course of midwifery.

Chronic metritis, first of the body of the uterus, then of the cervix uteri is explained—in reference to symptoms, pathology, and causes.

Lecture LXIX.

The treatment of chronic inflammation, in its several stages, of the neck and body of the uterus is first explained.

A short notice is taken of the series of symptoms to which the term *hysteralgia* has been applied.

The consideration of the inflammatory diseases of the uterus having been completed, that of those which consist in perversion of nutrition is next entered upon, and *fibrous tumours* of the uterus are treated of in relation to symptoms, pathology, causes, and treatment.

Lecture LXX.

In continuing the consideration of the diseases of perverted nutrition the following are discussed—and their symptoms, pathology, and treatment are explained.—*Polypus* of the uterus, *cauliflower excrescense* of the uterus, *carcinoma* of the uterus, *corroding ulcer* of the uterus.

Lecture LXXI.

The following further diseases of the uterus are shortly noticed.

Hydro-metra, *physometra*, *uterine moles*, *hydatids* of the uterus, *relaxation*, *prolapsus*, *procidentia*, *inversion*, *anteversion*, *anteflexion*, *retroversion*, *retroflexion*.

The consideration of the diseases of the uterine appendages is next entered upon, and inflammation of the *broad ligaments* is treated of.

Lecture LXXII.

The diseases of the *ovary* are considered, inflammation of the ovary, *ovaritis* acute and chronic is treated of, in relation to symptoms, pathology, causes, and treatment.

The pathology of *dropsy of the ovary* in its several forms is explained, its diagnosis is stated, its treatment both medical and surgical considered.

The lecture concludes with a short allusion to the other structural diseases, non-malignant, and malignant of the ovary.

APPENDIX (E).

Return of the Sick treated in the Clinical Medical Ward, of the J. J. Hospital, in the Session, 1849-50 *from* 15*th June* 1849 *to* 15*th April* 1850.

Names of Diseases.			Number Admitted.	Number Discharged.	Died.	Total.	Remarks.
Fevers	Ephemeral		1	1	0		
	Intermittent	Quotidian	12	12	0		
		Tertian	3	3	0		
		„ c. Cerebral Symptoms, & slight Pneumonia	1	1	0		
		„ „ Enlarged Spleen	18	18	0		
		„ „ Bronchitis	1	1	0		
		„ „ Pneumonia	1	1	0		
		„ „ Jaundice	1	1	0		
	Remittent	Simple	5	5	0	38	
		„ c. Enlarged Spleen	2	1	1		
		„ „ Jaundice	3	0	3		
		„ „ Head symptoms	6	6	0		
		„ „ Bronchitis	2	2	0		
		„ „ Pneumonia	7	6	1		

Return of the Sick treated in the Clinical, Medical Ward.—Continued.

Names of Diseases.			Number Admitted.	Number Discharged.	Died.	Total.	Remarks.
Fevers	Remittent	„ Pneumonia & Bronchitis	1	0	1		
		„ Hepatitis & Pneumonia	1	1	0		
		„ Gastric symptoms	1	1	0		
		„ Anæmic cardiac murmur	1	1	0		
						29	
	Eruptive	Variola	1	1	0	1	
Abdominal Diseases		Hepatitis	8	8	0		
		Hepatic Abcess	5	1	4		
		Jaundice	2	2	0		
		Diarrhœa	3	2	1		
		Dysentery	19	14	5		
		Dyspepsia	1	1	0		
		Colic	2	2	0		
		Ascites c. Diseased Liver	1	0	1		† Of these one still remains under treatment.
		Bright's Disease	10*	6†	4		* 2 of these were attacked with Cholera, of which one recovered.
		Diabetes	1	1	0		
		Cystitis	1	1†	0		† This case still remains under treatment.
						53	

Return of the Sick treated in the Clinical, Medical Ward.—Continued.

Names of Diseases.		Number Admitted.	Number Discharged.	Died.	Total.	Remarks.
Thoracic Diseases.	Pneumonia.	29	20†	9*		† 2 of these still remain under treatment. * One of these proved fatal by Cholera.
	Phthisis Pulmonalis.	10	4	6		
	Hæmoptysis.	2	1	1‡		‡ This patient died in his native country, Goa.
	Pleuritis.	5	3	2*		* One of these proved fatal by Cholera.
	Bronchitis.	7	6†	1		† One of these still remains under treatment.
	Asthma (vesicular Emphysema)	1	1†	0		† This patient still remains under treatment.
	Pericarditis.	2	2	0		
	Chronic Largugitis.	1	1†	0		† This patient is still under treatment.
	Disease of Heart (valves).	7	3	4*		* Two of these proved fatal by Cholera.
					64	
Diseases of the Nervous System.	Cephalalgia.	1	1	0		† 2 of these remain under treatment * 2 of these proved fatal by Cholera.
	Hemiplegia.	12	8†	4*		
	Delirium Tremens.	1	1	0		
	Cerebral Disease.	2	2	0		
	Chorea.	1	0	1†		† Died suddenly, cause not ascertained
	Otitis.	1	1	0		
					18	

Return of the Sick treated in the Clinical Medical Ward.—Continued.

Names of Diseases		Number Admitted.	Number Discharged.	Died.	Total.	Remarks
II. Other Diseases.	Rheumatism	9	9	0		
	Syphilis (Primary)	1	1	0		
	,, (Secondary)	4	4†	0		† One of these still remains under treatment.
	Cachexia	2	1	1		
	General Dropsy (Leprosy)	1	1	0		
	Scorbutus	1	1	0		
					18	
	Total Treated.	221	171	50	221	

APPENDIX (F).

Return of the sick in the Jamsetjee Jejeebhoy, Hospital for the year 1849-50.—*Average daily number* 260.

Bombay, 1st April 1850

Classes of Disease.	Specific Disease.	From each disease. Admitted.	From each disease. Died.	From each Class of disease. Admitted	From each Class of disease. Died.
Fevers.	Febris Ephemera.	39		427	68
	,, Intermittens Quartana.	..			
	,, ,, Tertiana.	11	.		
	,, ,, Quotidiana	192	6		
	,, Remittens	185	62		
	,, Continua Communis.	..			
Eruptive Fevers.	Variola.	59	20	59	20
	Varicella.	..	..		
	Rubeola.	..	..		
	Scarlatina.	..	..		
Diseases of the Lungs	Bronchitis acuta.	49	1	273	76
	,, Chronica.	60	6		
	Pneumonia.	79	28		
	Pleuritis.	5	1		
	Hæmoptysis.	2	..		
	Catarrhus acutus.	5	..		
	,, Chronicus.	..	..		
	Phthisis Pulmonalis.	65	39		
	Asthma.	18	1		
	Dyspnœa Continua	..	..		
Diseases of the Liver.	Hepatitis acuta.	30	2	64	18
	,, Chronica.	28	16		
	Icterus	6	..		
Diseases of the Stomach & Bowels.	Peritonitis.	6	4	425	130
	Gastritis.	2	..		
	Enteritis.	1	..		
	Hæmatemesis.	..	..		
	Dysenteria acuta.	84	25		
	,, Chronica.	62	20		
	Dyspepsia.	31	.		
	Pyrosis.	.	.		
	Colica.	29	.		
	Diarrhæa	210	81		
	Obstipatio.				
	Cholera morbus.		.		

Return of the sick in the Jamsetjee Jejeebhoy, Hospital.—Continued.

Classes of Disease.	Specific Disease.	From each disease. Admitted.	From each disease. Died.	From each Class of disease. Admitted.	From each Class of disease. Died.
Epidemic.	Cholera.	208	117	208	117
Diseases of the Brain.	Phrenitis.	3	1	103	18
	Cephalalgia.	7	..		
	Ictus solis.	..	..		
	Apoplexia.	6	5		
	Paralysis.	45	7		
	Hydrocephalus.	1	1		
	Amentia.	9	..		
	Mania.	15	..		
	Delirium Tremens.	12	..		
	Epilepsia.	5	4		
Dropsies.	Anasarca.	45	21	55	26
	Hydrothorax.	..	..		
	Ascites.	9	5		
	Beriberi.	1	..		
Rheumatic affections.	Rheumatismus acutus . . .	134	..	294	6
	„ Chronicus	152	6		
	Lumbago.	8	..		
	Ischias.	..	..		
	Podagra	..	..		
	Odontalgia.	..	..		
	Arthritis.	..	..		
Venereal affections and diseases of the Genital organs. . .	Syphilis Primitiva. . . .	341	5	707	20
	„ Consecutiva. . . .	250	14		
	Ulcus Penis, non syphilitica.	..	..		
	Bubo simplex.	33	..		
	Gonorrhœa.	61	..		
	Orchitis.	10	..		
	Strictura Urethræ. . . .	4	..		
	Cachexia Syphiloidea. . .	2	1		
	Phymosis.	6	..		
	Paraphymosis.	..	..		
Abscesses and Ulcers.	Phlegmon et abscessus. . .	89	4	334	27
	Paronychia.	8	..		
	Apostema Lumbare. . . .	..	..		
	Ulcus.	231	23		
	Fistula in ano.	1	..		
	„ Perinæi	5	..		

Return of the sick in the J. Jejeebhoy Hospital.—Continued.

Classes of Disease.	Specific Disease.	From each disease. Admitted.	From each disease. Died.	From each Class of disease. Admitted.	From each Class of disease. Died.
Wounds and injuries	Luxatio.	1	..	415	16
	Subluxatio.	1	..		
	Vulnus Incisum.	16	..		
	,, Sclopitorum.	1	..		
	Contusio.	317	7		
	Ambustio.	22	3		
	Fractura.	55	4		
	Concussio Cerebri.	1	1		
	Compressio.	1	1		
Punished.	Punitus.	..	..	..	..
Diseases of the Eyes	Ophthalmia.	29	..	29	29
	Amaurosis.	..	..		
	Nyctalopia.	..	..		
	Hordeolum.	..	..		
	Dysopia.	..	..		
Diseases of the Skin.	Urticaria.	..	..	192	18
	Pemphigus.	..	..		
	Ecthyma	..	..		
	Porrigo.	6	..		
	Scabies.	109	..		
	Psoriasis.	..	..		
	Lepra.	..	..		
	,, Tuberculosa.	77	18		
Other diseases.	Amputatio.	..	..	344	119
	Aneurisma.	..	..		
	Atrophia.	164	112		
	Calculus Vesicæ.	3	1		
	Carditis.	9	4		
	Contractura.	1	..		
	Cynanche Parotidea.	1	..		
	,, Tonsillaris.	2	..		
	,, Trachealis.	2	..		
	Cystitis.	1	..		
	Diabetes.	..	..		
	Dracunculus.	123	2		
	Dysœa.	..	..		
	Dysuriæ	10	..		
	Eneuresis.	..	..		
	Epistaxis.	1	..		
	Erysipelas.	4	..		
	Exostosis.	..	..		
	Hœmorrhois	17	..		
	Hernia.	6	..		

Return of the sick in the J. Jejeebhoy Hospital.—Continued.

Classes of Disease.	Specific Disease.	From each disease.		From each Class of disease.	
		Admitted.	Died.	Admitted.	Died.
Other Diseases.	Hernia Strangulata.	1	..	119	24
	Hydarthrus	..	..		
	Hydrocele.	15	..		
	Hydrophobia	3	3		
	Hypochondriasis.	..	..		
	Ischuria	..	..		
	Morbus Coxarius	..	..		
	Necrosis	9	3		
	Nephritis	..	..		
	Neuralgia.	5	..		
	Nostalgia	..	..		
	Otitis	3	..		
	Physconia.	..	..		
	Prolapsus ani.	..	..		
	Sarcocele	..	..		
	Scorbutus	88	12		
	Scrophula	8	..		
	Senectus	21	10		
	Splenitis	8	..		
	Tetanus	26	17		
	Tumores	6	1		
	Varix	..	..		
	Vermes.	1	..		
Diseases not included in the above.....		119	24	119	24
	Total. . . .	4,242	748	4,242	748

Diseases not included in the List.

Classes of Disease.	Specific Disease.	From each disease.		From each Class of disease	
		Admitted.	Died.	Admitted.	Died
Other Diseases . . .	Anthrax	1	..	119	24
	Abortion	5	1		
	Attempted suicide by hanging	1	..		
	Angina Pectoris.	1	1		
	Chorea	1	1		
	Cancrum Oris.	2	1		
	Dysphagia.	1	..		
	Debility	9	..		
	Disease of Knee-joint . . .	1	..		
	Ebrietas	23	1		
	Elephantiasis.	4	..		
	Gangrene	6	5		
	Hyperthrophied Scrotum . .	1	..		
	Hysteria	1	..		
	Iritis.	2	..		
	Injury of the Spine	1	1		
	,, ,, Head. . . .	1	1		
	Leucorrhœa	1	..		
	Mercurial Ptyalism. . . .	5	2		
	Poisoning by Dhatura . . .	33	1		
	,, ,, Opium . . .	4	3		
	,, ,, Arsenic . . .	2	2		
	Ptyalism	3	1		
	Prolapsus Uteri	2	1		
	Perturssis	3	1		
	Periostitis	2	..		
	Parturitio	1	..		
	Rupture of the Liver . . .	1	1		
	Sloughing of the Scrotum . .	1	..		
	Total	119	24		

APPENDIX (G).

ANNUAL RETURN of Dispensary patients attended

Diseases.	Christians							Muhammadans						Hindus					
	Remained.	Admitted.	Total.	Discharged. Cured.	Relieved.	Left Hospital.	Remaining.	Remained.	Admitted.	Total.	Discharged. Cured.	Relieved.	Left Hospital.	Remaining.	Remained.	Admitted	Total.	Discharged. Cured.	Relieved.
Fevers. Ephemeral	1	10	11	5	3	..	3	..	2	18	20	16	3	..	2	..	2	25	27
Eruptive	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Continued	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Intermittent	2	41	43	30	6	1	5	1	5	119	124	97	6	2	10	5	6	134	139
Remittent	..	10	10	3	6	..	1	..	..	19	19	11	3	1	2	1	1	17	18
Other Varieties	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Small pox	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Affections of the Brain, Spinal Cord & nervous System	..	11	11	4	3	..	4	..	1	26	26	16	6	1	4	..	..	30	30
Paralysis	..	..	..	..	..	..	..	..	..	14	14	8	3	..	2	1	1	20	21
Delirium Tremens	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Tetanus. Traumatic	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..
Tetanus. Idiopathic	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Affections of Nose, & Ear	..	11	11	5	4	1	..	..	..	36	36	24	..	..	1	..	1	27	28
——of Mouth and Fauces	..	4	4	1	1	1	1	..	..	30	30	23	7	..	4	..	1	27	28
——of Air passages	1	49	50	39	5	..	6	..	5	127	132	97	10	2	6	..	2	30	32
——of Lungs and Pleura	..	1	1	..	..	..	1	..	..	6	6	4	1	..	1	..	..	14	14
Phthisis Pulmonalis	..	1	1	..	1	..	..	..	..	1	1	..	1	..	..	..	..	4	4
Affections of the Heart, and Vascular System	..	7	7	3	2	..	2	..	1	31	32	21	7	1	2	1	..	34	34
——of the Liver	..	7	7	3	2	..	2	..	1	31	32	21	7	1	2	1	..	34	34
——of the Stomach and Bowels	2	50	52	40	1	1	9	1	8	164	172	124	8	2	37	1	5	179	184
Dysentery	1	12	13	4	2	1	6	..	1	35	36	23	7	1	4	1	..	41	41
Cholera Spasmodica	..	2	2	1	1	..	..	..	..	11	11	3	5	..	..	..	..	6	6
Affections of the Spleen	..	1	1	..	..	..	1	..	..	12	12	3	5	..	4	..	..	6	6
Dropsical Affections	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Beri Beri	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Rheumatic Affections	4	44	48	30	5	..	10	3	6	173	179	131	9	..	30	9	3	172	175
Affections of the Urinary organs	..	6	6	2	3	..	1	..	1	23	24	10	7	..	7	..	..	12	12
Venereal. Primitive	1	32	33	25	..	1	7	..	5	111	116	82	5	..	15	11	4	162	166
Venereal. Consecutive	..	15	15	6	7	1	..	1	..	68	72	7	37	..	8	5	2	62	64
Gonorrhœa	..	27	27	16	1	..	10	..	7	106	113	10	48	..	30	9	5	93	98
Affections of the Generative Organs	..	6	6	5	..	..	1	..	..	27	27	11	10	1	6	..	..	31	31
Hernia	..	1	1	..	..	..	1	..	..	9	9	3	2	1	2	1	..	6	6
Affections of the Rectum and Anus	..	7	7	3	2	1	1	..	1	20	21	12	6	..	2	1	..	16	16
——of the Bones & Joints	..	3	3	1	1	..	1	..	..	16	16	5	4	..	4	..	..	14	14
——of the General System	..	15	15	12	1	..	2	..	3	45	58	27	5	..	25	4	2	57	67
Scurvy	..	2	2	1	1	..	..	..	..	24	24	11	7	..	6	1	1	19	20
Old age or natural decay	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Entozoa	..	2	2	1	..	1	..	..	..	7	7	2	3	..	2	..	..	7	7
Dracunculus	..	4	4	3	1	..	..	..	1	22	23	7	5	2	8	..	1	32	33
Tumored	..	..	..	..	..	..	..	..	..	5	5	3	1	..	1	..	..	5	5
Hydrocele	..	3	3	1	1	..	1	..	..	13	13	3	..	1	9	..	..	28	28
External Inflammations	1	36	36	26	3	..	6	1	6	132	137	87	10	2	30	8	7	167	174
Erysipelas	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	1	1
Ulcers	1	23	24	21	2	..	1	..	1	111	116	82	10	2	18	3	6	127	133
Fractures	..	..	..	..	..	..	..	..	..	6	6	2	2	1	1	..	..	5	5
Dislocations	..	..	..	..	..	..	..	..	..	6	6	2	1	..	1	..	..	2	2
Wounds & Injuries of.. Head and Spine	..	7	7	3	2	1	..	1	..	16	17	8	4	..	3	..	..	7	7
Wounds & Injuries of.. Face, Neck and Throat	..	1	..	..	1	..	..	..	..	2	2	..	..	..	1	1	..	3	4
Wounds & Injuries of.. Thorax	..	1	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Wounds & Injuries of.. Abdomen	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	2	2
Wounds & Injuries of.. Loins and Pelvis	..	2	2	..	1	..	1	..	1	1	2	1	..	..	..	..	..	..	..
Wounds & Injuries of.. Extremities, Superior & Inferior	1	20	21	12	2	1	6	1	1	40	16	22	11	2	11	..	3	32	34

Diseases.	Hindus																		
	Discharged. Left Hospital.	Remaining.	Remained.	Admitted	Total.	Discharged. Cured.	Relieved.	Left Hospital.	Remaining.	Remained.	Admitted.	Total.	Discharged. Cured.	Relieved.	Left Hospital.	Remaining.	Remained.	Admitted.	Total.
Fevers. Ephemeral	..	2	2	25	27	7	10	1	8	1	1	2	..	..	..	2	..	..	..
Eruptive	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Continued	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Intermittent	6	5	134	139	44	1	..	..	93	..	..	..	..	..	..	..	..	..	..
Remittent	1	1	17	18	6	4	1	1	6	..	..	..	..	..	..	..	..	..	..
Other Varieties	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Small pox	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Affections of the Brain, Spinal Cord & nervous System	..	..	30	30	16	8	1	..	5	..	..	..	..	..	..	..	..	..	..
Paralysis	1	1	20	21	4	3	2	1	11	..	..	..	..	..	..	..	..	..	..
Delirium Tremens	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Tetanus. Traumatic	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Tetanus. Idiopathic	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Affections of Nose, & Ear	..	1	27	28	11	14	..	..	3	..	..	..	..	..	..	..	..	..	..
——of Mouth and Fauces	..	2	30	32	19	8	2	..	3	..	..	..	..	..	..	..	..	..	..
——of Air passages	3	3	12	15	4	4	..	1	6	..	..	..	..	..	..	..	..	..	..
——of Lungs and Pleura	..	..	14	14	5	..	1	..	8	..	..	..	..	..	..	..	..	..	..
Phthisis Pulmonalis	..	..	4	4	1	1	..	..	2	..	..	..	..	..	..	..	..	..	..
Affections of the Heart, and Vascular System	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
——of the Liver	..	..	34	34	19	8	2	..	5	..	..	..	..	..	..	..	..	..	..
——of the Stomach and Bowels	5	1	179	184	102	20	2	7	52	..	..	..	..	..	..	..	..	..	..
Dysentery	..	..	41	41	29	3	4	7	..	..	..	..	..	..	..	..	..	..	..
Cholera Spasmodica	..	..	6	6	2	2	..	..	2	..	..	..	..	..	..	..	..	..	..
Affections of the Spleen	..	..	6	6	..	3	1	..	2	..	..	..	..	..	..	..	..	..	..
Dropsical Affections	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Beri Beri	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Rheumatic Affections	3	1	172	175	99	22	14	6	34	..	..	..	..	..	..	..	..	..	..
Affections of the Urinary organs	..	..	12	12	6	2	1	..	3	..	..	..	..	..	..	..	..	..	..
Venereal. Primitive	11	4	162	166	106	22	1	25	12	..	..	..	..	..	..	..	..	..	..
Venereal. Consecutive	5	2	62	64	38	11	2	7	6	..	..	..	..	..	..	..	..	..	..
Gonorrhœa	30	5	93	98	74	10	..	10	4	..	..	..	..	..	..	..	..	..	..
Affections of the Generative Organs	6	..	31	31	16	10	1	4	..	..	..	..	..	..	..	..	..	..	..
Hernia	2	1	6	6	4	1	..	1	..	..	..	..	..	..	..	..	..	..	..
Affections of the Rectum and Anus	2	1	16	16	10	3	1	2	..	..	..	..	..	..	..	..	..	..	..
——of the Bones & Joints	4	..	14	14	9	1	..	4	..	..	..	..	..	..	..	..	..	..	..
——of the General System	25	4	57	67	35	6	2	25	2	..	..	..	..	..	..	..	..	..	..
Scurvy	9	1	19	20	12	6	..	1	..	..	..	..	..	..	..	..	..	..	..
Old age or natural decay	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Entozoa	2	..	7	7	5	1	..	..	1	..	..	..	..	..	..	..	..	..	..
Dracunculus	8	..	32	33	13	6	1	2	11	..	..	..	..	..	..	..	..	..	..
Tumored	1	..	5	5	3	1	..	1	..	..	..	..	..	..	..	..	..	..	..
Hydrocele	1	..	28	28	11	3	1	1	12	..	..	..	..	..	..	..	..	..	..
External Inflammations	30	8	167	174	100	10	1	6	54	..	..	..	..	..	..	..	..	..	..
Erysipelas	1	..	1	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..
Ulcers	18	3	127	132	90	6	3	30	1	..	..	..	..	..	..	..	..	..	..
Fractures	1	..	5	5	2	2	..	1	..	..	..	..	..	..	..	..	..	..	..
Dislocations	1	..	2	2	1	..	..	1	..	..	..	..	..	..	..	..	..	..	..
Wounds & Injuries of.. Head and Spine	3	..	7	7	3	1	..	3	..	..	..	..	..	..	..	..	..	..	..
Wounds & Injuries of.. Face, Neck and Throat	1	..	3	3	1	1	..	1	..	..	..	..	..	..	..	..	..	..	..
Wounds & Injuries of.. Thorax	..	..	18	18	9	1	2	..	6	..	..	..	..	..	..	..	..	..	..
Wounds & Injuries of.. Abdomen	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Wounds & Injuries of.. Loins and Pelvis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Wounds & Injuries of.. Extremities, Superior & Inferior	1	..	4	4	1	..	..	1	2	..	..	..	..	..	..	..	..	..	..

Jamsetjee Jejeebhoy Hospital during the year 1849-50.

Bombay, 1st April 1850.

Parsees.								Women of all Castes.								Children of both Sexes & all Castes, under 11 years of age								Total.							
				Discharged.							Discharged.							Discharged.								Discharged.					
Remained.	Admitted.	Total.	Cured.	Relieved.	Into Hospital.	Absented.	Remaining.	Remained.	Admitted.	Total.	Cured.	Relieved.	Into Hospital.	Absented.	Remaining.	Remained.	Admitted.	Total.	Cured.	Relieved.	Into Hospital.	Absented.	Remaining.	Remained.	Admitted.	Total.	Cured.	Relieved.	Into Hospital.	Absented.	Remaining.
=	16	16	9	4	..	3	..	1	16	17	8	5	..	4	..	..	7	7	4	1	..	2	..	1	91	92	47	27	1	22	1
.. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	14	14	8	2	..	4	..	..	14	14	8	2	..	4	..
5	95	100	70	10	2	13	5	5	111	116	106	2	1	1	6	..	44	44	10	6	..	8	14	22	544	566	463	40	9	22	44
.. ..	11	11	6	3	1	1	..	1	19	20	9	4	1	5	1	..	6	6	4	1	..	1	..	2	82	84	39	21	4	14	6
.. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
.. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
..	20	20	11	6	1	1	1	..	27	27	11	6	1	9	1	..	6	6	4	1	..	1	..	1	119	120	61	29	4	24	2
..	2	2	..	1	..	1	..	..	6	5	1	1	..	2	1	..	..	..	..	..	..	..	..	1	41	42	13	10	2	13	4
.. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	1	..	..	..
.. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
1	21	22	10	7	..	4	1	..	27	27	10	9	1	7	..	..	25	25	10	7	..	6	2	2	147	149	70	49	2	25	3
..	21	21	9	7	1	4	..	..	28	28	14	7	..	7	..	..	8	8	4	3	..	2	..	2	129	131	71	36	2	23	2
2	90	92	71	10	1	8	2	6	145	151	86	20	2	37	6	..	115	115	94	7	..	8	6	17	658	675	419	73	6	144	29
..	6	6	3	1	..	1	1	..	14	14	8	3	..	3	..	..	8	8	4	2	..	2	..	..	49	49	27	10	1	9	2
..	1	1	..	1	..	..	..	..	1	1	..	1	..	..	..	..	1	1	..	..	..	..	1	..	14	14	1	7	2	3	1
.. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	2	..	2	..	..	..
..	18	18	6	6	2	4	..	..	24	24	9	6	2	7	..	..	1	1	..	..	..	1	..	1	115	116	58	29	7	21	1
3	132	135	111	12	2	6	4	6	204	210	118	16	3	71	2	..	78	78	49	10	..	10	9	24	807	831	544	67	10	190	20
..	29	29	15	6	1	5	2	2	34	36	17	8	2	9	..	..	35	35	15	7	1	7	5	4	196	199	97	38	9	38	8
..	1	1	1	..	..	..	..	..	2	2	..	..	..	..	..	..	1	1	1	..	..	..	..	..	4	4	4	..	..	..	..
1	7	8	2	4	..	2	..	..	7	7	1	3	..	3	..	..	3	3	1	1	..	1	..	1	25	26	8	10	..	7	..
..	94	94	46	11	3	19	6	2	123	125	90	118	1	9	7	..	16	16	9	4	..	2	1	16	36	37	7	16	1	13	..
..	12	12	8	2	..	2	..	..	8	8	2	4	..	2	..	..	14	14	7	5	..	2	..	1	622	637	416	69	7	114	32
2	69	62	30	20	..	10	2	1	35	36	19	10	1	6	..	..	2	2	2	..	..	..	..	13	75	76	35	23	1	17	..
1	36	37	24	6	1	5	1	..	36	35	14	11	1	8	1	..	4	4	1	..	..	3	..	7	402	415	264	60	3	66	22
1	70	71	45	8	..	12	3	1	43	44	29	1	..	13	1	..	2	2	2	..	..	..	..	14	241	255	179	62	..	75	13
..	16	16	10	2	..	3	1	..	10	10	4	3	..	3	..	..	..	..	..	..	..	..	..	..	90	90	46	25	2	16	1
..	1	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	1	..	..	18	18	7	4	1	6	1
..	6	6	2	1	..	1	2	1	17	18	8	4	..	4	2	..	2	2	2	..	..	..	..	2	68	70	37	16	2	10	5
..	7	7	4	1	..	1	1	..	18	18	8	6	..	4	..	..	5	5	5	..	..	..	..	..	63	63	25	15	..	12	1
1	36	37	25	6	..	5	1	4	71	75	35	25	..	14	1	..	41	41	31	..	..	10	..	10	283	293	165	43	2	75	5
..	6	6	4	1	..	1	..	..	12	12	4	3	..	5	..	..	..	..	..	..	..	..	..	1	63	64	32	17	..	13	2
.. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
..	4	4	2	1	..	1	..	..	9	9	4	3	..	2	..	..	17	17	8	6	..	3	..	..	46	46	21	15	..	10	..
..	2	2	1	..	..	1	..	..	12	12	6	4	..	2	..	..	8	8	6	1	..	1	..	2	70	72	37	20	3	11	1
..	3	3	1	..	..	2	..	..	1	1	1	..	..	..	..	..	2	2	1	..	..	1	..	..	16	16	9	1	..	6	1
..	13	13	3	6	..	4	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	1	..	..	58	58	18	16	2	20	2
3	59	62	37	7	..	13	5	4	90	94	49	11	2	26	7	..	51	51	29	4	..	12	6	20	534	554	328	45	8	136	37
..	3	3	1	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	4	4	2	1	..	1	..
1	67	68	29	10	..	18	4	3	64	67	46	11	..	8	2	..	22	22	12	3	1	4	3	14	406	419	277	42	5	77	18
.. ..	..	..	..	..	..	..	..	..	4	4	2	1	..	1	..	..	2	2	1	..	..	1	..	..	17	17	7	6	1	4	..
..	10	10	6	2	..	2	..	..	13	13	4	5	..	3	1	..	3	3	3	..	..	..	..	1	67	68	33	17	3	13	2
.. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	1	..	..	..	..	..	3	3	1	..	..	1	1
.. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	1	..	..	..
.. ..	..	..	..	..	..	..	..	..	1	1	..	..	..	1	..	..	2	2	1	..	..	1	..	..	10	10	1	2	..	3	1
..	24	24	10	6	..	8	..	..	29	29	14	11	..	4	..	..	17	17	10	1	..	1	..	4	187	191	103	43	6	37	3

ANNUAL RETURN of Dispensary patients

Diseases.	Christians.								Mussalmans.								Hindoos.							
	Remained.	Admitted.	Total.	Discharged.				Remaining.	Remained.	Admitted.	Total.	Discharged.				Remaining.	Remained.	Admitted.	Total.	Discharged.				Remaining.
				Cured.	Relieved.	Into Hospital.	Absented.					Cured.	Relieved.	Into Hospital.	Absented.					Cured.	Relieved.	Into Hospital.	Absented.	
Punishment	..	..	..	..	..	..	..	..	2	28	30	15	8	2	2	3	..	1	1	..	..	..	..	..
Diseases of the Eyes { Acute	..	7	7	5	1	..	1	..	2	28	30	15	8	2	2	3	..	1	1	..	..	..	..	..
Diseases of the Eyes { Chronic	..	2	2	1	1	..	..	..	..	6	6	2	1	..	1	2	..	10	10	7	1	1	1	..
Diseases of the Skin	7	74	81	45	6	4	24	1	21	491	512	311	15	5	155	26	15	454	469	312	18	5	112	22
Lepra Graecorum	..	..	..	..	..	..	..	..	1	13	14	3	3	2	2	4	..	24	24	12	6	1	4	1
Hydrophobia	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Snake bite	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Poisoning	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Miscarriage	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Labour	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Uterine Diseases	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Total	29	549	571	353	78	11	119	10	86	2199	2285	1331	304	34	611	105	64	2305	2371	1360	304	63	587	97

ABSTRACT.

	Remained.	Admitted.	Total.	Discharged.				Remaining.	Average number of daily attendance.
				Cured.	Relieved.	Into Hospital.	Absented.		
Christians	29	541	571	353	78	11	119	10	19.1
Mussalmans	86	2199	2285	1331	304	34	611	105	24.0
Hindoos	68	2303	2371	1360	304	63	587	97	19.9
Parsees	34	1238	1272	759	190	17	287	49	17.2
Women of all Castes	51	1588	1639	931	256	31	371	50	48.6
Children of both Sexes and all Castes, under 14 years of age	„	868	868	536	80	2	161	79	9.1
Total	263	8735	8996	5270	1212	148	1976	390	136.21

attending the Jamsetjee Jejeebhoy Hospital.—Continued.

Parsees.								Women of all castes.								Children of both Sexes & all Castes, under 14 years of age								Total.							
Remained.	Admitted.	Total.	Discharged.				Remaining.	Remained.	Admitted.	Total.	Discharged.				Remaining.	Remained.	Admitted.	Total.	Discharged.				Remaining.	Remained.	Admitted.	Total.	Discharged.				Remaining.
			Cured.	Relieved.	Into Hospital.	Absented.					Cured.	Relieved.	Into Hospital.	Absented.					Cured.	Relieved.	Into Hospital.	Absented.					Cured.	Relieved.	Into Hospital.	Absented.	
	13	13	6	3		4		1	20	21	11	6	2	2			10	10	4	1		4	1	4	103	107	62	26	6	19	4
	6	6	1	1			5		5	5	2	1	1	1			1	1	1						29	29	14	6	3	7	
12	231	243	129	16	2	89	7	12	267	279	102	18	6	82	11	..	277	277	179	7	..	63	28	67	1794	1861	1138	80	19	529	95
	1	1	1						9	9	3	2	1	3			2	2		1			1	1	49	50	19	12	4	9	6

APPENDIX (H).

Table of minor operations performed in the presence of, and by the Students from July 1849 to April 1850.

Amputation of Fingers	10
,, of Toes	3
Applying Issues, Setons, and Sutures	30
Bleeding	55
Circumcision	10
Cupping	126
Cutting for Fistula in Ano	3
,, through adhesions between Tongue and Cheek	1
,, into Urethra for removal of Calculus	1
,, into Perineum for Extravasation of Urine	1
Dividing Prepuce and dissecting it from Glans	1
Extracting Teeth	81
Lancing Gums	4
Opening Abscesses	220
,, Granda	2
Operations for Entropium	3
Paracentesis Abdominis	6
Passing Catheters and Sounds	120
Puncturing Ganglions	2
,, Bladder above Pubes	1
Reducing dislocation of Jaw	1
,, ,, Hip	1
,, ,, Shoulder	2
,, Strangulated Hernia	2
Removing Epulis	1
,, Hypertrophied growth from Ear	1
,, Calculi from Urethra	3
,, Œdematous Prepuce	1
,, Tumors	3
,, Hœmorrhoids	2
,, Polypus from Ear	2
,, ,, Nose	3
,, ,, Pharynx	2

Removing Foreign bodies from Nose	4
,, Fibro-Cartilaginous tumor from Finger	1
Slicing off Fungous growth	1
Slitting up prepuce	6
Tapping for Hydrocele	95
Total	811

(Signed) J. PEET,
Professor of Surgery.

APPENDIX (J).

Return of Diseases and Injuries, treated in the Surgical Clinical Ward, from the 15th April 1849 to 15th April 1850.

Names of Diseases.			Number Admitted.	Number Discharged.	Died.	Remarks.
Abscess	Acute		5	5	..	
	Chronic		3	3	..	
Cancrum Oris			1	..	1	
Carbuncle			1	1	..	
Concussion of Spine			1	..	1	
Diseases of Bones	Caries		3	2	1	
	Necrosis		1	1	..	
Diseases of Urinary organs	Stricture of Urethra		4	4	..	
	Retention of Urine		1	1	..	
	Calculus Vesicæ		2	2	..	
	,, Urethræ		1	1	..	
Dislocations	Simple	Femur	1	1	..	
		Clavicle	1	1	..	
	Compound	Ankle	1	1	..	An old man insisted upon leaving the Hospital—reported to have died 3 days afterwards.
Erysipelas of Head			1	1	..	
Extravasation of Urine			2	2	..	
Fistula in ano			3	..	3	All fractures of the Base with rupture of a vessel.
Fractures	Simple	Skull	5	5	..	
		Clavicle	3	3	..	
		Arm	3	3	..	
		Forearm	1	1	..	
		Fingers				

Return of Diseases and Injuries treated in the Surgical Clinical Ward.—Continued.

Names of Diseases.			Mumber Admitted.	Number Discharged.	Died.	Remarks.
Fractures	Simple	Thigh	9	9	..	
		Patella	2	2	..	
		Leg	6	6	..	
		Rib	2	2	.	
		Nose	1	1	..	
	Compound.	Forearm	2	1	1	Death from Tetanus.
		Fingers	3	3	..	
		Thigh	1	1	..	
		Leg	7	5	2	One death from Gangrene, the other from Tetanus; In two cases, Amputation performed.
		Toes	5	5		
		Skull	1	1		
Gangrene of arm			3	1	2	Amputation of the Arm performed in the fatal cases.—Both deaths from Tetanus.
Gangrene of Scrotum			1	1	..	
Hernia			3	3	..	
Hæmorrhoids			3	2	1	
Hydrocele			3	3	..	
Injury of Urethra			1	1	..	
Malignant Disease of Testicle			1	..	1	
Penetrating wound of Abdomen			1	1	..	
of Chest			1	1	..	
Phlegmonous Erysipelas			1	1	..	
Rupture of Liver and Kidney			1	..	1	
Scrofula			3	3	..	

Return of Diseases and Injuries treated in the Surgical Clinical Ward.—Continued.

Names of Diseases.		Number Admitted.	Number Discharged.	Died.	Remarks.
Syphilitic Diseases.	Primary	9	9	..	
	Secondary	12	11	1	In the fatal case, death was occasioned by Dysentery.
	Gonorrhœa	3	3	..	
Syphilitic Iritis		3	3	..	
Tetanus		4	2	2	
Tubercular Leprosy		1	1	.	
Ulcers		4	4	..	
	Scorbutic	12	10	2	Both deaths occurred in men sent down from Aden—from extensive Gangrene.
	Sloughing	3	3	..	
	Weak	2	2	..	
	Irritable	3	3	..	
Wounds	Head and Neck	1	1	..	
	Trunk	6	6	..	
	Upper Extremity	6	6	..	
	Lower Extremity	16	13	3	One death from Tetanus, another from extensive Sloughing in an old man, and the 3rd from Acute Gangrene
		191	168	23	

List of Capital operations performed in the presence of the Students from April 1849 to April 1850.

	No.
Amputation of Arm	2
,, Thigh	2
,, Leg	3
Lithotomy	2
Removal of Fibro-cartilaginous Tumour from Abdomen	1
Total	10

APPENDIX (K).

OBSTETRIC INSTITUTION

OF

BOMBAY.

Bombay, 22nd April 1850.

Sir,—I have the honor to transmit for your information a copy of the proceedings of a Meeting held with the view of establishing an Obstetric Institution in Bombay.

The Committee are very desirous of enlisting your interest and active co-operation in advancing this important and much required Institution, and they trust that you will favor them by making the subject as generally known as your opportunities may admit of; and that in the event of your being able to obtain additional subscriptions you will have the goodness to cause them to be entered in the accompanying list, which may be then returned to the Secretary.

The Committee would further wish it to be understood, that as the object for which this support is solicited, must come home to the sympathies of all classes of the community, it is not intended that contributions should be restricted to the wealthy;—but that each individual should have an opportunity of rendering assistance however limited, and thus enjoy the gratification of having promoted to the utmost of his ability a measure calculated very materially to lessen the physical suffering of the women of this part of India, and ultimately, it may be hoped, to improve their social condition. It also seems to the Committee that there would be a peculiar grace and propriety in the wives and the daughters of the wealthy among us, lending their influence in the promotion of a charity which cannot fail, in an especial manner, to recommend itself to their sympathy and their favor. But on this subject the Committee for very evident reasons are unwilling to enlarge.

I have the honor to be,
Sir,
Your most obedient Servant,
C. Morehead, *Secretary.*

A meeting was held on Monday the 22nd April 1850, at the Library of the Asiatic Society, to make arrangements for the establishment of an OBSTETRIC INSTITUTION IN BOMBAY.

PRESENT.

The Hon'ble D. A. Blane, Esq , *President*, in the Chair.

Commodore Lushington, Commander-in Chief of the Indian Navy; A. S. LeMessurier, Esq., Advocate General; Colonel G. Moore, Military Auditor General; H. Gibb, Esq. Surgeon General; H. E. Goldsmid, Esq. Secretary to Government; Major John Holland, Quarter Master General; Henry Young, Esq. Collector of Customs; J. G. Lumsden, Esq. Secretary to Government; G. J. Blane, Esq. Accountant General; John Warden, Esq. Judge of the Sudder Adawlut; Juggonath Sunkersett, Esq.; Captain J. G. Forbes, Assistant Military Auditor General; H. P. Malet, Esq. Collector of Land Revenue; Dadabhoy Pestonjee, Esq.; Muncherjee Pestonjee, Esq.; Professor J. Peet; Professor H. Giraud; J. R. Hadow, Esq.; Major J. Swanson; Bomanjee Hormusjee, Esq.; M. Stovell, Esq. Secretary to the Board of Education; Mahomed Ali Khan; M. Larken, Esq. Register of the Sudder Adawlut; W. Acland, Esq. Company's Solicitor; A. H. Leith, Esq. Secretary of the Medical Board; Framjee Cowasjee, Esq.; A. Spens, Esq. Senior Police Magistrate; Alexander Burn, Esq. M. D.; Dr. Larkworthy; Dr. Peele; Rev. P. Anderson; Basker Soondarjee, Esq.; Rowjee Juggonath, Esq.; C. Morehead, Esq. M. D.; Dr. H. Miller.

After the Hon'ble Chairman had stated the objects of the Meeting, the following letter from Manockjee Limjee, Esq. was read: "I regret that in consequence of indisposition, I shall be unable to attend the meeting this afternoon, and take part in the proceedings as was my wish. I shall watch with the greatest pleasure the successful progress of the Institution, for it is one deserving of the warmest encouragement from the public, and particularly from the Native community. I shall be most happy to attend all future meetings, and give all the assistance that may be in my power."

The following Resolutions were then successively put to the meeting and unanimously carried:—

1*st Resolution.*—Proposed by Juggonath Sunkersett, Esq.; and Seconded by Dr. Leith—

That it is generally well known that in consequence of the want of skilful professional aid, child-birth among many of the classes of the Indian Native community is attended with an amount of mortality and of subsequent bad health, unknown in countries in which a bet-

ter system of practice prevails, and in which properly organized means of charitable assistance have been provided.

2nd. *Resolution.*—Proposed by J. Warden, Esq.; and Seconded by Dr. Morehead.

That these evils have to some extent been alleviated in Calcutta and Madras by the establishment of a Midwifery Hospital in each of these cities. That the success which has attended and the amount of relief which has been afforded by these Institutions, have fully realized the philanthropic expectations of their founders.

3rd. *Resolution.*—Proposed by J. R. Hadow, Esq.; and Seconded by Framjee Cowasjee, Esq.

That it is very desirable that an Hospital should be established, in which the females of the poorer classes of this populous island may be received, comfortably lodged, and carefully attended to, during the period of child-birth and its subsequent dangers, and that this Hospital should be designated the "Obstetric Institution of Bombay."

4th. *Resolution.*—Proposed by Colonel Moore; and Seconded by Ali Mahomed Khan.

That with the view of giving permanency to the OBSTETRIC INSTITUTION and of ensuring regular and efficient medical attendance and of giving to Native medical students and nurses the opportunity of acquiring a practical acquaintance with the important art of Midwifery, and thus be the means of extending its advantages to all classes of the community, it is very desirable that the Institution be connected with the Grant Medical College.

5th. *Resolution.*—Proposed by H. Young, Esq.; and Seconded by Dadabhoy Pestonjee, Esq.

That a subscription be opened with the view of raising the necessary funds, for building and other purposes. That the names of benefactors, to the amount of rupees 1000 and upwards, be, with the amount of their contributions, inscribed on a marble slab to be fixed in a conspicuous part of the building. That to separate wards, and to the dispensary, the names of benefactors, to the amount of rupees 3000 and upwards be given. The name to be inscribed on a marble slab, and affixed above the door of the ward.

6th. *Resolution.*—Proposed by A. LeMessurier, Esq.; and Seconded by Muncherjee Pestonjee, Esq.

That the following gentlemen be appointed a Committee to give effect to these resolutions:—

J. Warden, Esq.; Venayuk Gungadhur Shastree; Sir Jamsetjee Jeejeebhoy; Dr. Leith; H. Young, Esq.; Manockjee Limjee, Esq.; Framjee Cowasjee, Esq.; M. Larken, Esq.; Juggonath Sunkersett, Esq.; W. Acland, Esq.; Mahomed Ally Rogay, Esq.; Bomanjee Hormazjee, Esq.; J. R. Hadow, Esq.; David Sassoon, Esq.; Dr. Stovell, Dr. Morehead, Mahomed Ally Khan, Dr. Peele, Dadabhoy Pestonjee, Esq.; A. Spens, Esq; Cursetjee Jamsetjee, Esq; with power to add to their number, and Dr. Morehead as Secretary to the Committee.

7th. *Resolution.*—Proposed by Juggonath Sunkersett, Esq.; and Seconded by Col. Moore.

That the thanks of the Meeting are in an especial manner due to the Hon'ble Chairman for his kindness in presiding on the occasion.

The following is a list of the Subscriptions which have been already recorded. Subscribers are requested to pay the amount of their Contributions to the BANK of BOMBAY on account of the "*Obstetric Institution of Bombay.*"

	Rs.
His Highness Gunput Rao, Maharaj Guicowar	4,000
Juggonath Sunkersett	1,000
Venayuk Gungadhur Shastree	1,000
Sir Jamsetjee Jejeebhoy	3,000
Mahomed Ally Rogay	1,000
Cursetjee Jamsetjee	1,000
Rustomjee Jamsetjee	500
Sorabjee Jamsetjee	500
Colonel Moore	50
J. R. Hadow	100
Lieut. Colonel Melvill	100
Major Davidson	50
H. Young	50
M. Stovell	50
G. J. Blane	25
J. Swanson	50
A. Bell	100
John Peet	100
Richard D. Peele	100
John Keith	50
Bomanjee Hormusjee	200
Dadabhoy Pestonjee	100
Muncherjee Pestonjee	100
Manockjee Limjee	250

	Rs.
Byramjee Jejeebhoy	50
Lord Falkland	250
J. P. Willoughby	200
D. A. Blane	200
A. Malet	100
W. Yardley	100
John Warden	100
C. Morehead	150
William Acland	50
W. E. Goldsmid	50
H. Barr	50
H. P. Malet	15
J. G. Lumsden	50
A. S. LeMessurier	50
A. Spens	50
David Sassoon	100
Rustomjee Nowrojee	100
Saccaram Luxmonjee	50
Hormusjee Bomanjee	50
Framjee Cowasjee	100
Sorabjee Jejeebhoy	50
Ali Mahomed Khan	100
Bhaskur Soonderjee	50
L. C. C. Rivett	30
M. Larken	100
H. Gibb	50

APPENDIX (L).

MEMORANDUM OF THE COURSE OF LECTURES ON MIDWIFERY AND PUERPERAL DISEASES.

PART I.

The Anatomy and Physiology of Utero-Gestation.

The Pelvis—Female organs of generation. Development of the ovum.

PART II.

Natural Pregnancy and its deviations.

Signs and treatment of Pregnancy—Signs of the death of the fœtus—mole pregnancy—extra-uterine pregnancy—retroversion of the uterus—duration of pregnancy—premature expulsion of the fœtus.

PART III.

Eutocia or Natural Parturition.

Stages of labour—treatment of natural labour—mechanism of parturition.

PART IV.

Midwifery operations.

The forceps—turning—cæsarian operation—perforation—artificial premature labour.

PART V.

Dystocia or Abnormal Parturition.

1st Division.

As respects the child, ... { Malposition. / Faulty form and size of the child. / Faulty condition of the parts belonging to the child.

On the part of the mother, arising from a faulty condition... { of the pelvis. / of the soft passages. / of the expelling powers.

2nd Division.

Labour rendered dangerous to the mother or child, without obstruction to its progress.

From following too rapid a course.

From prolapsus, &c., of the umbilical cord.

From accidental circumstances; viz. Convulsions, syncope, dyspnœa, hœmorrhage, severe and continued vomiting, &c.

PART VI.

Puerperal convulsions, puerperal fevers, phlegmasiæ dolens, puerperal mania.

(Signed) R. D. PEELE,
Officiating Professor.

APPENDIX (M).

Memorandum of the course of Medical Jurisprudence.

The course of medical jurisprudence consisted of 50 lectures and 25 examinations.

In the division of the course the following arrangement of the subjects was adopted:—

1st. Those questions of a general nature were entered on, which are necessary to be known before proceeding to the consideration of others, such as, the nature of evidence and testimony—medical evidence—the different Courts of justice and appeal—as well as the medico-legal relations of age, sex, and the varieties of the human race. These subjects constituted the first *five* lectures.

2nd. Those questions which relate to the death or injury of individuals and which necessarily become the subject of judicial investigation, were then considered; such as of persons found dead, whether the death is real or apparent; and if the former, whether it is the result of natural causes, or is due to the effects of violence. Under the head of death from violent causes, that arising from asphyxia, produced by drowning, hanging, strangulation, irrespirable gases, &c., was each separately gone over; and following on these subjects, the more important and extensive one of injuries or deaths from wounds; infanticide and criminal abortion were treated of. To the consideration of the subjects of this division, *twenty* lectures were devoted.

3rd. Those questions which relate to the social condition of individuals, and which occasionally become the subject of legal enquiry, such as pregnancy, delivery, concealment of birth, rape, insanity, feigned diseases, and the principles of Life Insurance. These subjects were comprised in the succeeding *ten* lectures.

4th. "Toxicology," or the consideration of injuries or death from poisons, occupied the remaining *fifteen* lectures of the course.

Two lectures were delivered weekly, and one examination held. The text-book selected was "Taylor's Manual of Medical Jurisprudence," of which each student of the class possesses a copy, and in addition, "Christison on Poisons," was continually referred to, when the subject of toxicology was under consideration.

Throughout the course, the students were attentive and industrious, and the result of the periodical and final examinations showed that, with a few exceptions, they have made a very considerable and creditable acquaintance with the subject matter of the lectures.

(Signed) W. C. Coles,

April 10th, 1858. *Officiating Professor.*

APPENDIX (N).

LIST OF TEXT-BOOKS USED BY THE STUDENTS OF THE GRANT MEDICAL COLLEGE.

Anatomy.—Elements of Anatomy by Jones Quain, M. D. 5th Edition, 1843.

Chemistry.—A manual of Elementary Chemistry, Theoretical and Practical by G. Fownes, F. R. S., 1848.

Materia Medica.—A manual of Materia Medica and Therapeutics, &c., by J. F. Royle, M. D., F. R. S., 1847.

Physiology.—A manual of Physiology, &c., by W. B. Carpenter, M. D., F. R. S. 1846.

Practice of Medicine.—Lectures on the Principles and Practice of Physic, &c., by Thomas Watson, M. D., 1848.

Surgery.—The first lines of the Theory and Practice of Surgery, by Samuel Cooper, 1840.

Midwifery.—Rigby's Midwifery.

Medical Jurisprudence.—Taylor's Medical Jurisprudence.

All the Students are required, as a condition of attendance in the College, to provide themselves with the above text-books when studying the several subjects to which they relate. But a considerable proportion of the Students have also supplied themselves with other books, such as

Chemistry—Gregory's outlines of Chemistry; Kane's and Turner's Elements.

Materia Medica.—Christison's Dispensatory; Pereira's Materia Medica.

Physiology.—Carpenter's Principles, of human Physiology.

Pathology.—William's Principles of Medicine, and Alison's outlines of Pathology.

Practice of Medicine.—Library of Medicine, and Cyclopœdia of Practical Medicine; Hughes on Auscultation; Budd on the diseases of the Liver; Evanson and Maunsell on the diseases of Children, and Bird on Urinary deposits.

Surgery.—Cooper's Surgical Dictionary; Fergusson's Practical Surgery; Morton's treatises on Surgical Anatomy; Sir A. Cooper's lectures on Surgery,

Midwifery.—Churchill's Midwifery.

APPENDIX (O).

NOTIFICATION.

GRANT MEDICAL COLLEGE.

The following Scholarships and Prizes will be open for competition to the Students of the College at the close of the Session 1849-50, viz. in the month of April 1850.

I.

To all the Students of the College.

An ANDERSON Scholarship of Rupees 25 monthly, to the best Anatomist, and *Practical Surgical Anatomy included.*

II.

To the Fourth Year Students.

A CARNAC Scholarship of Rupees 25 monthly, for the greatest proficiency in, and practical knowledge of, *Medicine and Surgery.*

A FARISH Scholarship of Rupees 20 monthly, for the second degree of proficiency in, and practical knowledge of, *Medicine and Surgery.*

An ANDERSON Scholarship of Rupees 15 monthly, for the third degree of proficiency in, and practical knowledge of, *Medicine and Surgery.*

In awarding *these* Scholarships, much importance will be attached to assiduous and regular attendance in the Clinical Wards, and to efficiency and zeal in the discharge of the duties of Clinical Clerk and Surgical Dresser.

III.

To the Third Year Students.

A REID Scholarship of Rupees 20 monthly, for the greatest proficiency in the principles and practice of *Medicine and Surgery.*

IV.

To the Third and Second Year Students.

An ANDERSON Scholarship of Rupees 20 monthly, for the greatest proficiency in *Anatomy and Physiology*.

A FARISH Scholarship of Rupees 20 monthly, for the greatest proficiency in *Materia Medica* and *Practical Pharmacy*.

V.

To the Second and First Year Students.

A CARNAC Scholarship of Rupees 15 monthly, for the greatest proficiency in *Anatomy*.

A CARNAC Scholarship of Rupees 15 monthly, for the greatest proficiency in *Chemistry*, both *Theoretical* and *Practical*.

VI.

To the First Year Students.

A FARISH Scholarship of Rupees 10 monthly, for the greatest proficiency, care, and accuracy in compounding and dispensing Medicines in the Hospital.

VII.

THE SIR JAMSETJEE JEJEEBHOY ANNUAL MEDICAL PRIZE OF RUPEES 250.

To the Clinical Clerks and Surgical Dressers among the Fourth Year Students.

For the best Clinical Report of Medical and Surgical Cases.

The Report must consist of ten Medical Cases and ten Surgical Cases, selected by the Author from among those submitted to his care while officiating as Clinical Clerk and Surgical Dresser.

The history of the case, and the daily reports, must be the work of the Author, from observation of the case while under his care. Each case must be accompanied by "Remarks" relating to the pathology, the causes and treatment of the disease in the particular instance, with allusions to analogies or striking differences between it and other instances of the same disease which may have been treated in the clinical wards, or in the other wards of the Hospital, during the present or preceding Session.

In awarding this Prize, regard will be paid to the care, the accuracy, completness, and conciseness with which the history and daily reports of the cases are drawn up; and also to the intelligence and practical knowledge evinced in the selection of the cases, and in the remarks appended to them

VIII.

Prize consisting of PEREIRA'S MATERIA MEDICA, *and* ROXBURGH'S FLORA INDICA, *Presented by* VENAYUK GUNGADHUR SHASTREE, ESQ.

To be awarded to the Students of the College who, in addition to a good knowledge of Materia Medica, shews the greatest acquaintance with Indian Plants.

Conditions of Competition applicable to all the Scholarships and Prizes.

1. Competition for the Scholarships is open both to Free and Stipendiary Students.

2. The award of the Scholarships will be determined partly by the results of the Examinations, held at the close of the Session, but in a great measure also from the estimate formed during the Session, of the industry, assiduity, proficiency, and propriety of demeanour of the competitors.

3. The Scholarships will be held for a period of one year.

4. A *minimum* standard of proficiency will be fixed on, and should this standard not be exceeded, the Scholarships will not be awarded.

5. In the event of a Student being the successful competitor for more than one Scholarship, he shall, in addition to the award of one Scholarship, receive some honorary mark of distinction, but the second Scholarship shall pass down to the proficient in the next degree.

6. In the event of other Prizes being awarded to the successful competitor for a Scholarship, he shall receive the Prize in addition to the Scholarship.

7. The presence of the Students in the College and Hospital will be ascertained by roll-call, at least four times daily, throughout the Session; and those Students who, during the Session, have been absent from more than 15 roll-calls, exclusive of absence on recognised holidays, from sickness duly certified, and leave granted on unavoidable grounds, will not be permitted to compete for these Scholarships.

8. Those Students whose English Exercises, written during the Session, shew a marked want of attention to improvement in composition, will also be debarred from competing for these Scholarships

9. Should the written Exercises, required as part of the Examination for the Scholarships, shew a marked want of attention to improvement in English composition, the writer will be held disqualified for a Scholarship, whatever his qualifiations in other respects may be.

10. The successful competitors will be required to shew, by the result of the general examination at the close of the Session, that they have not neglected any of the branches of study with which they may have been engaged during their attendance in the College. Deficiency in this respect will disqualify for the Scholarships.

(Signed) C. MOREHEAD,
Supt. Grant Medl. College.

By order of the Board of Education,

H. J. CARTER,
Offg. Secretary.

Bombay, 24th September 1849.

APPENDIX (P).

GRANT MEDICAL COLLEGE.

The Annual Examination of the students of the Grant Medical College, will commence on Wednesday 20th March, and be conducted in the following manner:—

Wednesday, 20th.—STUDENTS of the 1st, 2d, and 3rd year. Viva voce examination in anatomy.

STUDENTS of the 4th year. Questions in the principles and practice of midwifery will be proposed, to which written answers will be returned.

Thursday, 21st.—STUDENTS of the 1st, 2d, and 3rd year. Written examination in anatomy. To *Candidates* for the *Anderson Scholarship* for anatomy, written questions will also be proposed.

Saturday, 23rd. — Examination in practical anatomy including competition for the *Anderson Scholarship.*

Monday, 25th.—STUDENTS of the 2d, and 3rd year. Viva voce examination in physiology.

STUDENTS of the 4th year. Written examination in medical jurisprudence.

Tuesday, 26th.—STUDENTS of the 2d, and 3rd year. Written examination in physiology.

Wednesday, 27th.—STUDENTS of the 1st, and 2d year. Viva voce examination in chemistry.

STUDENTS of the 3rd, and 4th year. Written examination in the practice of medicine.

Saturday, 30th.—STUDENTS of the 3rd, and 4th year. Viva voce examination in the practice of medicine. STUDENTS of the 1st, and 2d year. Written examination in chemistry.

Monday, 1st April.—STUDENTS of the 1st, and 2d year. Examination in practical chemistry.

STUDENTS of the 3rd, and 4th year. Written examination in surgery.

Tuesday, 2nd.—Viva voce examination in surgery; also operative surgery

Wednesday, 3rd.—STUDENTS of the 2d, and 3rd year. Written examination in materia medica.

STUDENTS of the 4th year. Viva voce examination in *midwifery*.

Thursday, 4th.—STUDENTS of the 2d, and 3rd year. Viva voce examination in materia medica. STUDENTS of the 1st, and 2d year. Examination in practical pharmacy and in compounding medicines.

Friday, 5th.—STUDENTS of the 4th year. Viva voce examination in medical jurisprudence.

Saturday, 6th.—CANDIDATES for the Anderson scholarship for anatomy.—Viva voce examination in anatomy.

Monday, 8th.—CANDIDATES for the Venayuk Gungadhur Shastree prize in materia medica and botany.

Tuesday, 9th.—STUDENTS of the 3rd, and 4th year. Clinical examination in medicine and surgery, including the application of bandages and surgical dressings.

STUDENT APPRENTICES, will be examined in anatomy on Monday 8th April, and in chemistry and materia medica on Wednesday the 10th.

These examinations are held with the view of awarding the Carnac, Farish, Anderson and Reid Scholarships, and the Sir Jamsetjee Jejeebhoy and Venayuk Gungadhur Shastree Prizes; and also of classifying the students and testing the progress made by them during the past session.

The examination will commence on each day at 11 A. M. and your attendance will be very acceptable to the Officers of the Institution.

C. MOREHEAD,
Supt. Grant Medical College.

March 7th, 1850.

APPENDIX (Q).

Questions in Anatomy.

Answered by 2nd and 3rd Year Students.

1. Describe the arch of the aorta in regard to its extent, direction and relations; and mention the more remarkable varieties in its course, and in the origin of its branches.

2. Describe that part of the left subclavian artery between its commencement, and the anterior scalenus muscle, and give an account of the dissection that would be necessary to expose it.

3. Give a full description of the ankle joint—the ligaments attached to it, and the arrangements of the tendons in relation with it.

Questions in Anatomy.

Answered by the 1st Year Students.

1. Describe the situation of the superior maxillary bone—its articulations with other bones, and name the muscles attached to it.

2. State the boundaries of the Thorax; name the organs contained in that cavity and mention their relations to one another. Describe the first and last ribs, and state how they may be distinguished from other ribs.

3. Describe the origin and relations of the muscles which are inserted into the base of the scapula.

4. State the relations of the femoral artery.

Questions in Chemistry.

Answered by 1st and 2nd Year Students.

1. Explain the mode of preparation, and the composition of the yellow prussiate of potash, and describe the method for procuring hydrocyanic acid from it, with the chemical changes that occur in the process.

2. Explain the use of amalgamating the zinc plates in a voltaic battery.

3. Why has ice in melting always the temperature of 32° Faht.

4. State what are the characters that distinguish antimony from arsenic.

Questions in Physiology.

Answered by the 2nd and 3rd Year Students.

1. Describe the distribution and functions of the 3rd, 4th, and 6th pairs of nerves.

2. Name the organs by which carbon is eliminated from the blood; describe minutely that part of the structure of the three most important of them, which is more immediately engaged in the process of elimination; also the nature of the process by which, the form and estimated quantity in which, the carbon is eliminated from each respectively.

Questions in Materia Medica.

Answered by the 2nd and 3rd Year Students.

1. From what sources is ammoniæ hydrochloras obtained, what are the processes for its manufacture, and what pharmaceutic preparations of ammonia are obtained from it.

2. What are the mildest and at the same time the most efficacious chalybeate preparations. State in what complaints you would administer them; in what manner and in what doses; state also what circumstances would contra-indicate their use.

3. How and from what plant is opium obtained, what is its composition, by what means would you judge of the goodness of opium. Describe and explain the Pharmacopœia process for the preparation of hydro-chlorate of morphia.

Questions in the Practice of Medicine.

Answered by the 4th and 3rd Year Students.

1. Explain the pathology of pericarditis, and endocarditis. Describe the symptoms, physical signs, and medical treatment.

2. What is understood by general dropsy. Give a general idea of its pathology, and of the indications to be kept in view, in its treatment.

3. Explain the pathology of acute dysentery, the symptoms, the indications of cure and the means by which these may be best effected.

Questions in Surgery.

Answered by the 3rd and 4th Year Students.

1. Describe the hip-joint, enumerate the dislocations to which it is liable, and state the symptoms by which each dislocation may be known, with the treatment and mode of reduction

2. What are the dangers to be apprehended after a penetrating *wound of* the abdomen attended with perforation of some part of the intestinal canal,—state how these dangers are *most likely* to be avoided. Describe the treatment proper for a wounded intestine.

3. Mention the diseases, and injuries for which the operation of tracheotomy may be required. Describe the manner in which that operation should be performed, and state the dangers to be guarded against in its performance.

Questions in Midwifery.

Answered by 4th Year Students.

1. With reference to the development of the ovum, describe the maternal and the fœtal membranes, the office they perform, and the period and manner in which they eventually leave the uterus.

2. What are the signs of pregnancy; the changes it produces on the system and the relative certainty, and *uncertainty of* the diagnosis.

3. Describe the progress of a natural labour, and the duties an obstetrician has to perform, from the commencement of the first, until the termination of the 3rd stage.

Questions in Medical Jurisprudence.

Answered by 4th Year Students.

1. Define the meaning of the term. "Wound" in a medico-legal sense, state the proof of a wound having been inflicted during life, and whether it was the result of suicide, homicide or accident.

2. State what you know of the detection of spots of blood.

3. How would you distinguish poisoning by opium, from apoplexy, and from intoxication by alcohol?

4. Enumerate the tests you would employ for the discovery of hydrocyanic acid in organic liquids. Describe the mode of employing each. State their effects, their relative value, and the nature of the chemical changes which ensue.

Questions in Anatomy.

Answered by the Candidates for the Anderson Scholarship.

1. Describe the dissection necessary to expose the internal iliac artery; state the course, extent and relations of that vessel, name its branches and trace the pudic artery, describing particularly its surgical relations, and mention those varieties of this vessel, which would complicate the operation of lithotomy.

2. In a space bounded in front by a vertical line drawn over the external angular process, behind by a similar line in front of the meatus, below by a horizontal line $\frac{1}{2}$ of an inch beneath the zygoma, and above by the temporal ridge. Describe all the parts in the order they are met with as far as the median line.

3. Describe the relations of the crural ring, and mention the extent of the crural canal. Give an account of the arrangement of the superficial fascia of the groin, and mention all the coverings of a crural hernia, proceeding from without inwards.

Examination for the Venayak Gungadhur Shastree Prize—in Botany.

The competitors for the Venayak Gungadhur Shastree Prize, were S. A. De Carvalho, and Narayan Dajee, and the examination for awarding this prize, was conducted by laying before the Candidates living specimens of "*Agati Grandiflora*, and *Carissa Spinarum*," and requiring them to write a systematic description of these plants. They were also required to reply to the following:—define the botanical characters of the natural family, *Solaneæ*; mention all the plants of this order with which you are acquainted, and describe in a general manner their properties and uses.

APPENDIX (R).

Tabular Statement exhibiting the classification of the 4th year Students in accordance with the results of the examinations held from the 20th March to the 10th April 1850. The lowest number marks the first in merit.

No.	Names.	† Medicine	‡ Surgery.	Midwifery.	Medical Jurisprudence.	Total.	Remarks.
1	Sebastian Carvalho	1	4	1	2	8	
2	Ananta Chundroba	6	1	3	1	11	† Including Clinical Medicine.
	Bhawoo Dajee*						
3	J. C. Lisboa	4	3	3	4	14	‡ Including Clinical Surgery.
4	Atmaram Pandurang	2	2	3	8	15	
5	Merwanjee Sorabjee	5	5	3	5	18	* This student was prevented by indisposition from attending the examinations.
6	Muncherjee Sorabjee	7	7	2	3	19	
7	Paul Frances Gomes	3	6	3	9	21	
8	Dossabhoy Bazonjee	9	10	3	7	29	
9	Ardaseer Jamsetjee	11	11	4	6	32	
10	Burjorjee Dorabjee	12	8	3	11	34	
11	Nasserwanjee Bomanjee	8	9	6	12	34	
12	Furdonjee Jamsetjee	10	12	4	10	36	

Tabular Statement exhibiting the classification of the 3rd year Students in accordance with the results of the examinations held from the 20th March to the 10th April 1850.

No.	Names.	Anatomy	Materia Medica.	†Institutes of Medicine	Surgery.	Medicine	Total.	Remarks.
1	Narayan Dajee.....	1	1	1	1	1	5	†The examinations in the Physiological division of the course only.
2	Sadashew Hemraj.....	3	4	2	2	2	13	
3	Shamrao Narayan.....	2	2	4	3	3	14	
4	Balcrushna Chintoba.....	4	3	3	4	4	18	

Tabular Statement exhibiting the classification of the 2nd year Students in accordance with the examinations held from the 20th March to the 10th April 1850.

No.	Names	Anatomy	Chemistry.	†Institutes of Medicine	Materia Medica.	Total.	Remarks.
1	Rustomjee Byramjee.....	1	2	1	3	7	†Examinations in the Physiological division of the course only.
2	Paluujee Pestonjee.....	4	1	2	1	8	
3	Balcrushna Saccaram.....	2	3	3	4	12	
4	Wittal Anunt.....	3	4	1	2	13	

Tabular Statement exhibiting the classification of the 1st year Students in accordance with the examination held from the 20th March to the 10th April 1850.

No.	Names.	Anatomy.	Chemistry.	Total.	Remarks.
1	Kuttonjee Hormusjee	1	1	2	
2	Bala Gopal	2	2	4	
3	Moreshwar Janardan	3	4	7	
4	Hector Summers	5	3	8	
5	Nasserwanjee Cursetjee	4	5	9	

APPENDIX (S).

Tabular Statement exhibiting the classification of the Student Apprentices in accordance with the results of the examinations held on the 8th and 10th April 1850. The lowest number marks the first in merit.

No.	Names.	Rank.	Anatomy.	Chemistry.	Materia Medica.	Total.	Remarks.
1	Edward Carpenter	1st Grade.	1	1	1	3	
2	Shreeput Sheshadree	2nd „	2	3	7	12	
3	William Conway	1st „	4	4	4	12	
4	Nagapa	1st „	3	2	8	13	
5	William Douglas	1st „	5	7	2	14	
6	John *Dillon*	2nd „	6	6	3	15	
7	William Aikin	1st „	7	8	5	20	
8	A. N. Lafond	1st „	8	5	9	22	
9	J. B. Fernandez	1st „	9	9	6	24	
10	John Wright	1st „	10	10	10	30	
11	Patrick Ryan *	1st „					* Prevented by indisposition from attending.

C. Morehead.

Supt. Grant Medical College.

APPENDIX (T).

Bombay, 26th April 1850.

SIR,

In the 8th paragraph of the minute dated the 26th April 1849, by Surgeon General J. Burnes, K. H., the Superintendent of the Grant Medical College is requested to report, at the close of the session, on the progress made by the student apprentices, and to offer any suggestions on the subject generally that may occur to him.

2. In compliance with these instructions I have the honor to annex * a statement exhibiting the comparative proficiency of the student apprentices, in the subjects of study in which they have been engaged; and at the same time to offer the following remarks.

3. The experiment has been altogether satisfactory, and affords just grounds for anticipating, that apprentices who are of industrious habits, and of good conduct, and who possess an adequate knowledge of the English language, and of the simple rules of arithmetic, will leave the Medical College, after two year's study, with their general intelligence improved, and with such a degree of knowledge, of anatomy, chemistry, materia medica, medicine and surgery as must prove highly advantageous to the interests of the Government, as well as conducive to the advancement, and respectability of the young men themselves.

1st. *Apprentices.*
W. A. Davis.
W. Conway.
W. Douglas.
P. Ryan.
T. Gahagan.
E. Carpenter.
J. W. Wright.
Nagapa.
J. B. T. Fernandez.
A. B. Lafond.
Heeralal.

2d. *Apprentices.*
W. Atkin.
T. White
J. Dillon.
Sircenpat Sheshadri.

4. The fifteen apprentices noted on the margin were directed by General Orders to join the Jamsetjee Jejeebhoy Hospital for duty in that Institution, and for instruction in the Grant Medical College. With the exception of 1st apprentice T. Gahagan, and 2d apprentice T. White, they all joined, some before,—others shortly after the commencement of the session, on the 15th of June.

5. In September, I found it necessary to report to the Medical Board, that 1st apprentice W A. Davis was in my opinion, from idleness, and inattention, and want of propriety of demeanour and truthfulness of character, unworthy of the privilege of being borne on the list of student apprentices; and I requested that he might be re-

* Appendix (S.)

moved, in order that his bad example might not have a prejudicial influence, on the younger apprentices. To this request the Board were good enough to accede.

6. Of the remaining twelve, 1st apprentice Heerapa soon evinced such a total want of industry, attention and trustworthiness as to render his attendance on the College classes, a mere waste of time, and an obstruction to others. His duties have in consequence been confined to the Hospital.

7. 1st Apprentice Patrick Ryan has been in bad health for some months past, and his qualifications have not been submitted to the test of examination. I am not without hopes that, with better health, he will next session be able to take that place which may be anticipated from the promise of the early years of his service.

8. Of the remaining ten student apprentices, Edward Carpenter, has been conspicuous for his industry and good conduct, and for the proficiency made in his studies. This circumstance has been already reported to the Medical Board, and the merit of this apprentice rewarded by a prize of books presented to him by the Right Hon'ble the Governor, on the occasion of the annual College meeting.

9. Shreeput Sheshadri, W. Conway, Nagapa, and W. Douglas have also conducted themselves with much propriety, and made very creditable progress in their studies.

10. John Dillon, W. Aikin, and A. H. Lafond have not made so much progress as they ought to have done; but I have reason to hope from their general good conduct, and docility that they will acquit themselves better during the next session.

11. The progress made by J. B. Fernandez, and J. W. Wright, has been so little, and the prospect of any improvement is altogether so hopeless, that it is inexpedient that they should any longer be permitted to continue in attendance in the College.

12. I would therefore recommend that the apprentices noted on the margin be allowed the privilege of another year's study in the College; and that six other eligible apprentices be selected to complete the original number, and be directed to join the J. J. Hospital before the 10th of June next; and that apprentices, J. B. Fernandez, J. W. Wright be transferred to another Hospital.

1st. Apprentices.
E. Carpenter.
W. Conway.
Nagapa.
W. Douglas.
P. Ryan.
W. Aikin.
A. H. Lafond.

2d. Apprentices.
Shreeput Sheshadri.
J. Dillon.

13. It will be also further advisable that 3 or 4 Probationers be kept attached to the Hospital, to aid in carrying on the duties of the wards, while the student apprentices are engaged in the College.

14. In regard to suggestions on the subject generally, I would venture to observe that it is very desirable that such arrangements should be made relative to the apprentices of the public services, as shall in time lead to two years study in the Medical College, forming part of the regular course of training, and being held necessary to qualify them for promotion to the higher grades. I am unable from the want of the necessary data, to enter upon the details of a scheme calculated to effect this object, but I may be permitted to suggest that it ought to involve the following considerations.

1st. The apprentices, before admission into the service, should be able to read and understand English well, to spell with accuracy, and to write a fair hand. They should understand the simple rules of arithmetic, the rule of three included.

2d. Before admission into the College, they should be trained for two years in a well disciplined Hospital; there practised in reading and writing English, in assisting in the preparation of hospital papers, in compounding medicine, and ministering to the wants and comforts of the sick.

3d. Before admission to the College, their knowledge of the English language, and of the simple rules of arithmetic should be again particularly tested, and their character for industry, good conduct, and docility enquired into and noted.

4th. Those apprentices whose conduct, disposition and acquirements have been favourably reported on during their attendance, and at the time of leaving the College, should alone be promoted to the higher grades, and that, in the order in which they have been classified in the College books. Apprentices reported unfit, during or at the close of the College course, should be removed from the service. A consideration of the state of the subordinate Medical Service of Bengal and Madras, of the detailed arrangements in the Bengal College relative to the training of Native Doctors, and of those of the Madras Medical School for the education of apprentices, European and Native, could not but materially assist in furthering a scheme for the instruction, and greater efficiency of the medical apprentices of this Presidency.

I have the honor to be
Sir,
Your most obedt. Servant.
C. Morehead.
Supt. Grant Medical College.

To,
The Secretary to the
Medical Board,
Bombay,

APPENDIX (V.)

DONATIONS TO THE MUSEUM.

Prepared and presented by Bhawoo Dajee

10 Skulls of Natives of India.
1 Ditto of a China man, native of Macao.
1 Ditto Malay, native of Java.
1 Ditto Manilla-man.
2 Ditto Natives of Africa.
1 Ditto extensively destroyed by syphilitic ulceration.
2 Pelves of natives of Africa.
1 Pelvis of a native of India.
1 The fœtal vessels and heart injected through the umbilical vein with the liver, lungs, and thymus gland.
1 Complete bones of the fœtus
1 Stomach and spleen of the fœtus.
1 Portion of middle lobe of right lung in a state of grey induration with, in places, the appearance of tubercular infiltration,—taken from a patient in the J. J. Hospital.
1 Ulcerated larynx of a patient who died from phthisis pulmonalis.
1 Twin fœtuses between the 5th and 6th months.
1 Uterus and its appendages from an elderly female.

Prepared and presented by Narayan Dajee.

1. Arteries of the head and face very minutely dissected, and their anastamosis distinctly shewn.
2. The sinuses of the dura mater injected, and distinctly shewn.
3. The arteries of the circle of Willis injected.
4. Arteries of the left upper extremity injected, and separated from the bones and soft parts, shewing high division of the brachial artery;—the radial being given off about 2 inches below its commencement.
5. The portal system of vessels minutely injected.
6. The heart and lungs injected and dried, shewing the roots of the lungs, and the relation of the several vessels that enter into their formation.

7. The arteries of the upper extremities of both sides injected and separated from the soft parts, shewing the high division of the brachial artery.

8. The veins, arteries and nerves of the leg minutely dissected.

9. The arteries of the upper extremity minutely dissected with the principal nerves, and veins, also the high division of the brachial artery, the ulnar artery being given off about 2 inches from the commencement of the brachial artery.

10. The opposite extremity of the same subject similarly injected, and dissected with high division of the brachial artery, and with the additional variety of the continued trunk of the brachial dividing into the radial, and interosseous arteries, the latter forming the superficial palmar arch in conjunction with the ulnar.

11. Human cæcum, distended with air, dried, and opened to show the ileo-cœcal valve.

12. Abdominal aorta injected, and separated shewing the absence of the cæliac axis.

Prepared and presented by Atmaram Pandurang.

1. The heart of a patient from J. J. Hospital shewing the conversion of the mitral valve into an irregular mass of ossific matter ; as also hypertrophy, and dilatation of both sides of the heart chiefly the left, and some thickening of the aortic semilunar valves.

2. The heart of another patient shewing dilatation of the left ventricle into 2 distinct pouches, the one situated at the upper and back part, being as large as a small orange, and its walls membranous.

3. The heart of a patient who died in the first Hindoo ward, having been treated for remittent fever, and the diseased heart being detected only a day or two before his death, showing a somewhat thickened state of the mitral valve by lymph deposit.

4. The heart of a patient admitted in an advanced state of disease shewing hypertrophy, and dilatation of both sides of the heart with a cavity in the posterior wall of the left ventricle.

5. A dried preparation of one of the bullœ found in the lungs of the same patient.

Prepared and presented by Palonjee Pestonjee.

1. Arteries of the left upper extremity injected, and dissected shewing the high division of the brachial artery. The radial artery being given off one and a half inch below its commencement

2. A minute dissection of the lumbar plexus of nerves, and the branches given off from it to the thigh, and also the arteries.

3. Arteries of the lower extremity injected, and minutely dissected.

4. Injection shewing the high division of both carotid arteries,

Prepared and presented by Rustomjee Byramjee.

Preparation showing the origin of the left mammary artery from the thyroid axis.

Prepared and presented by Merwanjee Sorabjee.

1. A minute dissection of the arteries and nerves of the right half of the chest, and the right axilla, showing also the situation, and arrangement of the sympathetic ganglia, and some of their branches; also the situation of the heart, and the branches arising from it.

2. A dried preparation of the female organs of generation, showing the cavity of the uterus, the internal surface of the cervix, and of the vagina and the situation of the uterine arteries, fallopian tubes, ovaries, and the broad ligaments.

Prepared and presented by Sudashew Hemraj, and Shamrao Narayan.

1. Ligaments of the sterno-clavicular articulation.
2. Ditto of the shoulder-joint.
3. Ditto of the vertebræ.
4. Ditto of the foot.
5. Human stomach and duodenum distended with air dried, and opened to show the sphincter.

Prepared and presented by S. Carvalho.

1. A portion of lung, showing dilated bronchial tubes going to a solidified portion.

Prepared and presented by Anunta Chundroba.

1. Nerves of the upper extremity minutely dissected.

Presented by J. J. Hospital.

1. Numerous renal calculi found in a kidney.
2. Two calculi from the bladder extracted after the operation of lithotomy.
3. One calculus extracted from the urethra.
4. Oblique fracture, of the tibia and fibula.

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Presented by J. G. Nicholson, Esq

6. Heads of Egyptian mummies.
4. Hands of ditto.

Presented by Dr. A. Burn.

1. Fractured femur.
2. Sections of urinary calculi.

Presented by Dr. Mackenzie.

1. Body of an anencephalous child born, still, on the 16th August 1849, calculated to be about the 8th month.

Presented by Dr. Carter.

1. Dorsal spine of Balister.
2. Jaws of Sparoides.
3. Jaws of Tetrodon.